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ORIGINAL COMMUNICATIONS.

On the Nature and Treatment of Cholera.

By HENRY HARTSHORNE, M. D.

There is reason to believe, with Favell, that the cholera-attack may be, in general, resolved into three grades or stages :

1st. That in which the morbid (unknown, but supposed material) cause has reached only the alimentary canal, or the ganglionic centres which control its movements and secretions ; giving rise to the premonitory symptoms, or those of *cholerine*.

2d. That in which the “poison” affects all the ganglionic centres* (miscalled those of the sympathetic nerve), and all the muscles of organic life, as well as some of the voluntary muscles ; including in the former category the muscular coat of the stomach and intestines, the heart, bladder, smooth muscular fibres of the bronchial ramules, and the muscular coat of all the arteries and of some of the veins ; producing what Prof. Meigs has most graphically called the *cholera-squeeze*, or universal tonic spasm of the organic muscular tissue ; the pressure of which upon the blood produces an arrest of circulation, and an actual expression or forcible filtration of serum through the coats of the vessels, (and thence out by the mucous membranes), just as urine is filtered from the *corpora Malpighiana* into the uriniferous tubules of the kidney—all those morbid appearances after death.

* Loder, of Moscow, Orton, Delpech, Lizars, Coste, Favell, &c.

which some have called inflammation, being, in truth, merely venous congestion, and the effects of what may be properly called vascular spasm.* It may be noticed, also, that the abundance of *free epithelial cells* in the intestines, after death, upon which so much stress was laid by Prof. Horner and by Böhm, has been proved by Drs. Parkes, Gull, Lindsay, &c., to be the result of maceration and not pathological.†

The pathology of the 3d stage consists in the confirmed poisoning of the *blood*, putting it, in many instances, beyond the power of recovery, so that patients often die after reaction from the collapse, with symptoms analogous to those of low fever. Examples of this occur everywhere, during the prevalence of a malignant epidemic,—as in the Philadelphia Alms House in 1849, and at Columbia, in 1854.

Indications for a rational treatment may, it appears to the writer, be deduced from such a pathology.

In the first stage, mild anodynes and diffusible stimulants, (perhaps, even, certain astringents), are very often sufficient to relieve and check the attack.

Some cases, however, pass directly, without any premonitory diarrhoea, into the collapse.‡ In anticipation of this, when threatening to occur, camphor, opium, chloroform, ammonia, creasote, and the essential oils, have been, as I believe, found to be the best of remedies.

In the second stage, Duchaussoy and Vernois§ have proved the absolute *non-absorption* of medicines. Stomachic stimulants and anodynes, to act locally,—and *ice*, to relieve the agonizing thirst, are all that it is worth while to give. In the early, or merely impending collapse, the external application of heat, as by the hot bath, &c., may do great good; later, it annoys and distresses without advantage, as Legroux and others have shewn.|| I have seen this myself. Mustard cataplasms, according to general report, do more positive good; and so do frictions with red pepper and spirits, linimentum cantharidis, &c.,

* Marsden on Cholera, p. 34.

† Begbie, Edin. Med. and Surg. Journal, Jan. 1855.

‡ Vide Milroy on Cholera and Quarantine, p. 10.

§ Gazette Hebdomadaire, Sept. 8, 1854.

|| Bull. Gén. de Thérapeut., Sept. 15, 1854.

perseveringly employed. The galvanic battery would seem to be a rational means of exciting reaction; it has occasionally succeeded, but not often.* Venous injection has frequently been able to reanimate the patient for a period, and, in a number of cases, has effected final restoration. This must be the *only mode*, unless by inhalation, in which we can affect the system generally in the collapse of cholera. Dr. Little, in 1832 and 1849, introduced small quantities of alcohol in this manner, with perfect success in several instances.† Messrs. Duchaussoy and Vernois found the pupils to be dilated after injecting belladonna into the cephalic vein, when the largest doses by the stomach had no effect. I would suggest that belladonna and stramonium are remedies which ought to do good in cholera—as they, more than any other substances, induce relaxation of contracted organic muscular fibres. They should be tried by inhalation, as has been done in asthma; and I venture to propose, also, what I believe has never been thought of—*warm baths of the infusion of stramonium leaves*, in the incipiency of the collapse. Anodyne baths are now frequently used for other purposes. Great success is reported, in a recent journal, to have attended the employment of hot *hop* baths in tetanus.

It is proper to try all imaginable remedies in a disease so desperate as cholera, with whose therapeia we are, at last, so imperfectly acquainted.

Belladonna, or atropia, might be injected, with a saline solution, into the bronchial or saphena vein: and quinine might be employed in a similar mode. It must be remembered, however, that, even used in this way, medicines do not have their ordinary effect in proportion to the dose, on account of the morbid state of the nervous centres. Thus, Magendie† found that two grains of camphor, diffused in water and injected into the veins of a cat, will make the animal bound several feet; but, in a case of collapse, when 5ss. of camphor was similarly injected, not the smallest excitement was produced.

In regard to *calomel*, there is no indication for its use to be drawn from the morbid anatomy, or from the inferred pathology

* Report of Dr. Gull to Royal Coll. of Phys., p. 209.

† Report of Dr. Gull, p. 215.

‡ London Med. and Surg. Journal, Vol. ii., p. 586.

of the disease. The argument in its favor, from the absence of bile in the stools, is rebutted by the fact of its abundance in the gall-bladder; and the clinical experience so commonly quoted on its behalf, is to be accounted for by the universal addition to it of opium in the prescription. In fact, however, the amount of success claimed for it is not very great, even with this adjunct. Such is the opinion of Dr. Gull, based upon the materials collected in his well-known and elaborate report.

I have but to remark, farther, upon the *rate of progress* of the disease. Phthisis may be a complaint of years; whooping-cough, of months; typhus, of weeks; pneumonia, of days; but cholera must be numbered by its hours, half-hours, or even minutes.

The rate of treatment, then, must be in proportion. We should give medicine, if we give it at all, in small quantities, every five or ten minutes: and especial perseverance must be maintained in the use of external applications, until the patient has fairly commenced to improve. When the blood begins to run through the veins of the hand so fast that the eye cannot follow it, after having been, as it often is, nearly at rest, he is mostly safe.

As to the third stage, or consecutive fever, of cholera, it is, perhaps, sufficient to say, that the treatment ought to be mild, palliative, expectant, and carefully supporting. Too little done, here, is better than too much.

If nothing new is added in the above short resumé of the treatment of cholera, my purpose is answered if the opinion be clearly conveyed, that a careful survey of the best recorded experience warrants the elimination of much that has been relied upon, especially in regard to the hepatic and constitutional medication of the collapsed stage.

Creatine spontaneously deposited in Oxaluria. By GEORGE W. MILTENBERGER, Professor of Pathological Anatomy in the University of Maryland.

(Communicated in a letter to Dr. Neill.)

You will recollect that when I had the pleasure of meeting you in Philadelphia, I told you that in several cases I had lately found creatine existing in such amount or such combination in the urine, as to be deposited in fine and well-marked crystals, simply upon spontaneous evaporation. Taking into consideration the quantity of creatine which normally exists, the apparent relation between its excess, and the diseased states in which I have as yet found it, and the effects, as far as I can yet judge, of treatment, I deem it, if not of practicable importance, of sufficient pathological and physiological interest to solicit attention. I send you, by express, two slides, containing some of the crystals, so that you can judge for yourself, and if you consider it of sufficient interest, you can insert a notice or a more detailed statement of the fact in the *Examiner*, if you choose so to do.

In the early part of April last, I was consulted by F., a merchant engaged in and controlling a large and extensive business, for certain nervous and dyspeptic troubles, which almost entirely incapacitated him for business, and prevented the mental effort and concentration absolutely requisite in the discharge of his daily duties. In fine, he had all the symptoms which would attend a severe case of oxaluria, while, at the same time, there was marked waste and deficient nutrition, with great muscular debility. Attention being directed by the symptoms to his urine, it was found to present an unusually large deposit of oxalate of lime, (octohedra), with the oval plates or laminæ, thought by Bird to be oxalurate of lime. A drop of urine placed on a slide for examination, and covered with a thin cover-glass, was accidentally laid aside, when I was called off. Some twelve to fifteen hours afterwards I again put it under the instrument, and was struck with the unusual appearance presented. The next day, upon farther examination, when the crystalline forms were more marked, there could be no doubt, as far as microscopic appearances went, that it was creatine. It corresponded perfectly with the representations in the plates of Robin and Verdeuil, and as I have since satisfied myself with those of Funcke. I have sub-

mitted them since to the best microscopists here, all of whom agree as to their character. Attracted by the fact, I have since examined in like manner the urine in three cases of confirmed dyspepsia, all marked by more or less waste and emaciation, and muscular debility, and in the three have met with the same deposit. In another case, a boy aged 20 came into the Hospital lately, with numerous congestive abscesses in the lower limbs, a pallid, almost earthen complexion, feeble circulation, almost total inappetency, great emaciation and excessive muscular prostration. Upon careful examination of his chest, commencing tuberculosis was evident. His urine presented the richest deposit of oxalate of lime (octohedra) I have almost ever seen. Here, also, creatine was largely deposited.

All that has been necessary in these instances, has been to place the drop of urine on the slide, as for examination, and suffer it to evaporate spontaneously, when the crystals mentioned have been found in from 24 to 48 hours.

During this period I have examined various and numerous specimens of urine from other individuals, some in health, others in various morbid states, without any such result. In all the five cases where it has been seen, there have been found the crystals and oxalate of lime. If it should prove that it is not thus present, except in cases of oxaluria, and that it is not thus in excess in all cases where the oxalate is present, may it not account for the discrepant views concerning the practical import of that deposit among different observers? some believing that when the oxalate is found, it is always an indication for a particular line of treatment and a matter requiring attention; others denying that it is of any practical import.

On the other hand, it may be related to the muscular waste and debility, and its connection with the oxalate of lime be a mere coincidence, in which case, however, its physiological bearing (as to its source) would be a matter of no less interest.

As to the treatment, I have nothing new to offer. The first four were treated as cases of oxaluria, three of them with the nitro-muriatic acid; the fourth, in whom there was a predominance of the oval plates (oxalurate of lime) with nitrate of silver. In all they readily responded to the treatment, and promptly and rapidly improved, with marked diminution of the creatine.

I may be in error, but as far as my reading extends, I can find no notice of the fact that creatine has ever been found thus in urine by spontaneous evaporation. I have examined all the authorities within reach, including Lehman, and have consulted many who have been long and zealously engaged in urinary pathology, but have hitherto been unsuccessful.

Baltimore, May 12th, 1855.

On the Contagion of Puerperal Fever.

To the Editor of the Medical Examiner:

Dear Sir,—On reading the review, in the March number of the Examiner, of Dr. Holmes' work, I was impressed with the conviction that it must be decided upon experience alone, whether puerperal fever is contagious or not, and whether there are not different diseases included under that name. This experience should be generally contributed by all who have cases in their charge, and then the professional mind would soon become settled on this now much mooted question. Thinking that perhaps a statement of four obstetrical cases that have been under my care lately might prove useful, I subjoin it.

Mrs. McT. was brought to bed with her first child, Dec. 4th, 1854. After a natural labor she was delivered of a son; considerable hemorrhage followed his birth, which was easily arrested however. On the next day she was seized with a chill, followed by fever, with pulse of 126; slight chills recurred for two days more; retention of urine took place also. On the fourth day tenderness was observable in the hypogastric region and slight meteorism; there was little or no milk in the breasts, and the pulse rose to 144. The tenderness increased for some days, and the abdomen became tympanitic; palpitations became troublesome; but no delirium or heavy perspirations were observable. By the steady use of blue mass and opium (not however to narcotism or ptyalism) until the skin began to relax, and the tongue, previously heavily furred, showed a disposition to clean, and supporting the system then with quinine, she improved much, and was beginning to walk about the room by December 22, but on December 25 was seized with phlegmasia alba in the right leg. Her pulse rose again to 140, she became delirious, and had copious sweats, but under the influence of quinine she recovered

rapidly, and by the 20th of January, 1855, was able to leave her room.

On January 11th I was sent for to attend Mrs. T., living two squares only from Mrs. McT. She was safely delivered of a boy and got well without a bad symptom. She had had puerperal fever after her previous child's birth.

My next obstetric case occurred on March 9th. Mrs. F., of nervous temperament, was delivered of a healthy girl after a short labor. She had for some time been suffering under a white discharge, which I suspected was syphilitic, but owing to absence from the city was unable to make a specular examination. On the second day this patient had a slight chill, which returned with increased severity on the third and fourth days. Intense peritonitis now set in, with a pulse of 140, a heavily furred tongue becoming dry and dark in the centre, changed expression of countenance, slight but well marked intoxicated delirium, and heavy sweats. Slight retention of urine also took place. But under the use of blue mass and opium at first, then of oil of turpentine (as a stimulant) and laudanum and quinine, she gradually recovered, and is now suffering only from weakness.

From the bedside of this patient I was called to see Mrs. M., living two miles from the last patient, on March 16th. I drew off Mrs. F.'s urine with the catheter, and then drove immediately to Mrs. M.'s and delivered her of a fine girl. The mother was well in a few days.

Such is the history of my obstetric cases between December and March. Previous to December, nothing of interest had occurred in them, all getting well speedily. The alternation of the cases, and the almost direct communication established between the last two, seem to me worthy of attention.

Yours respectfully,

J. CHESTON MORRIS, M.D.

Philadelphia, April 20th, 1853.

Case of Musket-ball in the Bladder.

By JAMES W. ROBINSON, M.D.

Nearly eighteen months since there fell under my observation a case of an anomalous character, which I have ever since desired to make public, but from negligence have suffered it to escape

my attention until this late day. Hoping, however, that it may possess sufficient interest to warrant publication even after so great a lapse of time, I transmit to you an imperfect account of the case—imperfect from the fact that it is entirely from memory, having made no written record of the particulars at the time. I was then pursuing the duties of my profession, twenty miles northwest of this place, on the great thoroughfare leading from Chambersburg to Pittsburg. I was called six miles west on that road to see a patient who presented the following history:

He was a man between 30 and 35 years of age, of good physical development, and unquestionably at one time of fine constitution. Two years previous to the time he fell under my care, he was engaged in trading, in the State of Texas, whither he had migrated from Cincinnati, his former home. While pursuing his avocation in that State, he received a shot from a musket ball, which entered the depression formed by the glutei muscles on the outside of the hip, and passing through, behind the femur, lodged, he could not tell where. He lay for some weeks from the effects of the wound, without any medical or surgical treatment, and finally recovered sufficiently to return to Cincinnati. Here he entered the hospital, where he informed me that he suffered for some time from a vesico-rectal fistula, which was eventually cured by repeated cauterization; also, that either the wadding of the gun or a portion of his clothing driven before the bullet, had been removed by an operation, from the cavity of the bladder. During all this period, and up to the time at which I met with him, he could only pass his urine with much pain, by aid of a gum catheter which he had learned to insert himself, and carried constantly with him; the urine always being loaded with more or less purulent matter. Life becoming a burden to him in this situation, and his means of subsistence being reduced to an extremity, and not satisfied with what had been done for him in the Cincinnati hospital, he made his way to a similar institution in Pittsburg, at which place nothing more in the way of an operation was attempted, and no prospect of relief afforded him. He entertained some vague notion that an operation might be performed which would relieve his condition, but had no conception of the nature or rationale of it. Hence he conceived the idea, no doubt from the advice of some other person, of endeavor-

ing to seek his way from Pittsburg to the Pennsylvania Hospital at Philadelphia, for the purpose of presenting his case to the surgeons of that institution. With that in view, his last hope of earthly comfort, he started from Pittsburg in his critical state of health, on foot and without money.

Buoyed up with the prospect of a relief of his sufferings, he travelled on at a slow pace, in the month of October, the weather cold and his clothing light. On one of the days in the latter part of that month, there came on a heavy storm of snow and rain, lasting throughout the day, and covering the ground to a considerable depth. During the whole of this day he wandered over long and steep hills, drenched with rain and chilled with snow, and halted at night at a tavern 116 miles east of Pittsburg, sick and exhausted, his day's journey having sown within him the seeds of death. After lying sick for a number of days without any medical treatment or attendance, I was called upon to visit him. I found him in a miserable condition, complaining of intense pain over the left kidney and in the region of the bladder, and passing, by means of the catheter, considerable quantities of urine heavily charged with pus, with much suffering during the evacuation of the bladder. He had labored under considerable febrile reaction, which had now assumed a real typhous type. He had for a length of time, that is in all probability ever since he received the wound, suffered from chronic inflammation of the bladder, which was forced into a more active state by his exposure to the inclement weather, while there was superadded evident acute inflammation of the left kidney. His tongue had assumed the dark brown or blackish aspect, so characteristic of his low typhous condition, with all the other symptoms corresponding. In the way of treatment, my efforts were directed towards effecting a mercurial impression, both by internal and external use, but without avail. Demulcents and stimulants, ammonia and wine, and finally brandy and the application of powerful sinapisms and other medicines, and applications which have escaped my memory, and the recollection of which for our present purpose would be of little importance, were also used. He seemed to rally slightly sometimes, but lingering on for near ten days, he sank and died under copious hemorrhage from the bladder and bowels simultaneously. Two hours after death I proceeded to make a post-

mortem examination, which was, of necessity, very imperfect from the want of assistance, scarcely being able to procure the services of any one to furnish me a sufficiency of light (it being in the night) from the horror people out of the profession pretend to have for such operations. The examination, however, was sufficiently minute to invalidate my diagnosis, and to reveal a very remarkable case. The left kidney I found to be a mass of suppuration. The bladder was much indurated, and its coats thickened to an incredible extent. Laying open its walls I found within its cavity a musket ball of the largest size, with a calculus three or four times the size of the bullet attached to its side. I have both the ball and the calculus in my possession, though they have become detached by violence. The ball weighs more than an ounce, and is the largest I ever saw. The calculus measures more than an inch in every dimension, except one, being a little flattened and of a cylindrical shape.

The singularity of the case is in the fact that a large musket ball, with a portion of clothing, was driven entirely through the fleshy part of the hip within the cavity of the pelvis, and finding a lodgement in the bladder, allowed it to heal over it, and that it remained there for two years without causing disturbance inconsistent with life. Also, that after the first shock of the injury he underwent a partial recovery without any treatment. It is also very singular that he came through the hands of a number of surgeons who failed even to detect the presence of these foreign bodies in the bladder. I regret very much that he did not reach the Pennsylvania Hospital in as good health as he left Pittsburg, then able to make a long journey on foot in bad weather. I am very sure the able surgeons of that veteran institution would not have mistaken his case, but would have unhesitatingly submitted him to the operation of lithotomy, with every prospect of saving his life and restoring his health.

I regret that my recollection and a more minute examination of the case do not enable me to give an account marked with that exactness and clearness of detail which must be a characteristic of every good clinical or post-mortem report.

Warfordsburg, Fulton Co., Pa., April 17th, 1855.

New Form of Cataract Needle. By JOHN NEILL, M.D., Professor of Surgery, Pennsylvania College.

In the operation for cataract by solution or absorption, every one has experienced the necessity of having an instrument that would not merely prick or perforate, but one that would also cut or divide the capsule and lens. In addition consequently to the old instruments recommended by Scarpa, Saunders and Adams, we have recently been favored with many improvements in this department of Surgery.

Fig. 1. Fig. 2.



Mr. Gemrig, the cutler, has lately made for me an instrument which I think combines all that is to be desired in a needle for this operation.

Figure 1 represents the real size and form of the needle, and figure 2 exhibits it enlarged two-fold.

The peculiarities are that it has but *one cutting edge*, which is *straight*, and it is therefore more readily sharpened, especially as *its sides* are *flat*, whereas in the double edged and lancet-shaped needles the edge is *convex* and the sides are also *convex*, and hence the difficulty in obtaining the great desideratum, a cutting edge. I have directed also that the edge of this miniature straight bistoury should form only one half of the needle, the remaining half or shank being cylindrical, so that it can be revolved readily in the wound through the tunics, which could not be done if the edge occupied the whole of the needle, as is the case in the old fashioned iris-knife.

The back of the needle is rounded and slightly convex, although this is not of much importance; but near the point the back should be sharpened slightly so as to facilitate its ready penetration. Its length is $\frac{5}{8}$ of an inch.

In a recent operation at the Pennsylvania Hospital, I had great satisfaction in the use of this needle, in dividing adhesions which had formed between the lens and iris, the result of inflammation subsequent to a previous operation.

I might also add that others engaged in this depart-

ment of surgery, and whose experience and judgment I much value, have assured me of their satisfaction in its employment.

Mineral and Thermal Springs of the United States.

By JOHN BELL, M.D.

While engaged in preparing my full and elaborate work on Mineral and Thermal Springs, which, I regret to say, will not make its appearance this year, I have thought that a brief notice of those of the United States would be acceptable at this time. It will, at least, serve to give a wider range of selection for those who are yet undecided as to the spot which they may visit in the dog-days.

I shall not begin far "down east;" and shall, therefore, first notice the *Berkshire Soda Spring*, within three miles of the beautiful village of Great Barrington, Berkshire county, Massachusetts, through which four daily trains of cars pass. Great Barrington is 28 miles from the Hudson river and the city of Hudson. The chief mineral impregnation of this water is in the soda, combined with carbonic acid and chlorine, and a little alum.

Oak Orchard Acid Mineral Springs.—Under this title we meet with a very active water, holding in solution, sulphates of magnesia, alumina and iron, with other salts, and an excess of sulphuric acid, constituting what is called Alum Water of some of the Virginia Springs. It is an active tonic and astringent.

These springs are about six and a half miles south of the village of Medina, on the Erie canal, and eighteen south-east from Lockport, Genesee County, New York.

Avon Sulphur Springs.—The waters of these springs are among the strongest of the sulphureous class, and contain also sulphate of soda and other salts, which render them purgative. In one of them (in the Sylvan group) iodine has been detected.

Avon is on the eastern bank of the Genesee river, in Livingston County, New York, eighteen miles from Rochester. The springs were known to the Indians, who resorted to them for the cure of diseases,—a reputation well deserved and sustained to the present day.

Saratoga Springs.—These springs are deservedly celebrated, and nowhere can be found mineral waters of the carbonated

saline class at once so pleasant and endowed with so much medicinal activity. Then, in addition to the chief fountain, there are iodine and chalybeate springs, so that all desirable variety is furnished for the relief or cure of a large circle of diseases. We need not give here an analysis of these waters; but refer to the treatises of Steele, North, and Allen on this point, and on their medicinal uses.

Lebanon Spring.—This is ranked, on the score of temperature, among the Thermal springs, and of gaseous impregnation, among the nitrogen ones. The water is constantly at 73° F., while that of the other springs in the county (Rensselaer) is 52° F. Its saline impregnation is very slight, being only a grain and a quarter in the pint. The temperature is such as to render the Lebanon water a delightful bath. So copious is the supply that not only is there an abundance for all the baths, but also enough to turn two or three mills erected within a short distance. These are kept running during even the severity of the winter.

Albany Mineral Springs.—They are represented to be very similar to those of Saratoga and Balston; but they contain a smaller proportion of carbonic acid gas.

Canandaigua Sulphureous Springs.—These are eight miles north-west of the town. They gush from a hill in so copious a stream as to turn a mill.

This class of waters is very numerous in the State of New York. At *Buffalo* there is one of considerable strength. The water contains, in addition, carbonates of lime, magnesia and soda, and sulphate of lime.

Sharon Springs.—These sulphureous waters almost rival those of Saratoga, in the reputation which they have acquired for the cure of various chronic maladies; while the spot itself has superior natural beauties. One of the springs, the Magnesian, has a greater proportion of saline contents, and a greater tendency to act on the bowels than the other; and hence it is used in cases in which the exciting effects of the latter, or White Sulphur as it is called, would be injurious.

In addition to the well known Brine Springs and Salines in New York, there are, also, many medicinal saline springs in the districts in which the former prevail.

Byron Acid Spring.—In the salt group of Onondaga, in a

portion of the Silurian system of the State, we meet with this spring, the water of which contains an excess of sulphuric acid, by which and its other contents it ranks among the Alum Springs.

Sulphureous Springs of Vermont.—Among these we may enumerate the *Highgate* springs, within 12 miles of the steam-boat landing at St. Alban's Bay; also those of Newbury 27 miles east of Montpelier and 47 north-east from Windsor; and those of Alburgh.

Bennington Thermal Spring.—It is thus designated by Professor Hitchcock, who does not, however, give its temperature. It emits both nitrogen and oxygen gases. The water is abundant enough to turn the machinery of a powder mill.

Schooley's Mountain Springs.—These are the most noted and most frequented of the mineral springs of New Jersey. The water 50° F. is a mild saline chalybeate, the virtues of which are greatly aided by the cool and invigorating air of this spot.

Bedford Springs.—These rank foremost in Pennsylvania, on account of their mineral properties and medicinal effects, and their mountain elevation and surrounded scenery. They are two miles from the town of Bedford, and less than 200 miles from Philadelphia and not 100 from Pittsburg: they are 130 miles from Baltimore, and the same distance from Washington. The water of the chief spring is a saline chalybeate. Others have received the designations of *Limestone*, *Sweet*, *Sulphur* and *Chalybeate*. The most active ingredients in the first or main spring are sulphate of magnesia and carbonate of iron. The temperature of the water is 55° F., which must be somewhat higher than the common springs of this region.

The Bedford water has acquired deserved celebrity in indigestion and chronic diarrhoea and dysentery, and in renal diseases, in which the inflammation or inflammatory excitement has subsided, and there remains an atonic and enfeebled condition of the organs. In uterine and in cutaneous diseases which have reached this stage, and have assumed a chronic character, it is, also, of decided benefit. The gouty and rheumatic in whom there is no plethora or cerebral determination, have also reason to speak well of this water.

What with the invigorating effects of the water, and of the mountain air and mountain walks, the visitors must be supposed

to have a keen appetite, and to require a bountifully supplied table ; the more so as the majority at a watering place do not rank themselves among the class of invalids, and have to rely on something more than drinking the water or bathing, to keep up their strength and spirits. Of the way in which these things are managed at Bedford I cannot speak from personal experience.

Within a day's ride of Bedford are the little town of Bath, in Virginia, and its thermal spring, of which further mention will soon be made.

York Springs.—One of them is saline, the other a strong chalybeate. The water of the first is said to be diuretic and mildly cathartic. This place is readily reached by railroad from Philadelphia and Baltimore. It is in Adams County, "two to four hours ride of Gettysburg, Carlisle, Harrisburg and Hanover."

Perry County Springs.—These, erroneously called "Warm," are so far thermal as to be, probably, fifteen or eighteen degrees higher than the common spring of the country ; and hence the water would furnish a pleasantly cool, approaching to a temperate bath. They are fourteen miles from Harrisburg and the same distance from Duncannon, on the Central Railroad, and at the foot of Pisgah mountain, in a district which allows of fine drives and rides.

Carlisle Springs.—The water of these springs is a mild sulphureous one. They are within a short distance of the town of Carlisle, which is traversed by the railroad from Philadelphia to Chambersburgh.

Doubling Gap Sulphureous and Chalybeate Springs.—They are situated in a gap formed by the doubling of the Kittitany or North Mountain, about thirty miles south-west of Harrisburg. The Cumberland Valley Railroad passes through Neuville, distant eight miles from the Springs, to which visitors are taken by stages.

Bath Chalybeate Springs.—At one time these springs used to be visited by many of the citizens of Philadelphia, on account, in good part, of ready access to them. They are within a short distance of Bristol, on the Delaware.

Besides these Mineral Springs of Pennsylvania now enumerated, there are cold springs of pure water, which, owing to their situation in healthy and romantic districts of country and the

facilities furnished for cold bathing, have acquired deserved vogue. Of these I shall notice—

The Yellow Springs.—They are in Chester County, thirty miles from Philadelphia; and are reached from this city by railroad and stages. The view of the surrounding country is fine, and facilities are given for excursions in different directions. In addition to the natural baths of the temperature of the chief spring, which is 53° F., warm ones are also obtainable. The house is well kept, and the table every way good.

The Ephrata Mountain Springs.—These springs, situated 13 miles north of Lancaster, are resorted to by large numbers of people every year. The scenery, the grounds around, the hotel accommodations and the means for procuring baths of various temperatures, present strong inducements to visit this spot.

Caledonia Springs.—To the inhabitants of the city who have suffered from the wear and tear of business, to the invalid slowly recovering from disease, to those who have become weakened and exhausted in the giddy round of pleasure, and to all who would like to see Nature in her nobler aspects, this spot is eminently inviting. New scenes and new associations of a genial and abiding character are opened to us; and, for a time at least, we feel ourselves relieved from leaden cares, and enjoy a sense of unwonted freedom. While nature has been so bountiful in her mountain and woodland views, her pure and copious springs and streams, and her vivifying and exhilarating air, art has also contributed its share to the comfort of the visitors to these springs, who are received in a new, spacious and well ordered hotel, are comfortably lodged, and sit down to a table every way well supplied—the viands good, abundant, and prepared with due culinary skill.

The Caledonia, long known as Sweeny's Cold Springs, have enjoyed, during many years past, quite a reputation, when used as a bath, for the cure of chronic rheumatism and various other diseases in which there is a blending of still remaining febrile heat and irritation with debility. Warm baths are, also, always to be had.

The springs are situated on the South Mountain, which rises in the rear of the hotel, and in front they command an extensive

view of alternate woods and fields, terminated by a semicircular sweep of the North Mountain.

Without meaning to undervalue the efficacy of mineral waters, the writer can recommend invalids, or the weak who wish to become stronger, to make the regular drinking of the singularly pure water of one of the springs, before breakfast and before dinner, a part of the pleasant regimen of good eating, sound sleeping, and varied exercises which he will enjoy at this favored spot.

The Caledonia Springs are fifteen miles from Chambersburg; the greater part of the road being the turnpike which unites this town with Gettysburg. Visitors, on their arrival by railroad from Philadelphia or Baltimore, are taken out immediately in omnibuses or other vehicles from Chambersburg to the springs, which they reach on the evening of the same day of their leaving either of the cities just named.

Virginia is peculiarly rich in mineral springs, and until the acquisition of California and New Mexico, had more thermal ones than any other portion of the United States. Beginning at the North and advancing to the South, we first meet with—

The Bath (Berkeley county) Spring.—This, like the Sweet Springs, is a mild carbonated or acidulous thermal water, of the temperature of 73° F., the same as that which in England, by a strange blunder, is called Bristol Hot Well. It has been very serviceable in a variety of chronic diseases, when used as a bath. Persons who went there crippled with chronic rheumatism have come away quite restored to the free use of their limbs, and as agile in all their movements as the country people around. The internal use of the water merits more attention than it has generally received, especially in atonic and irritable dyspepsia and chronic bowel diseases.

Bath is within a short distance of the Baltimore and Ohio railroad, if we are not mistaken; and, as already stated, it is not far from Bedford, Pa.

Shannondale Saline Springs.—These springs are within a few miles of Charlestown, Jefferson county, through which the railroad from Harper's Ferry to Winchester passes. The water acts as a mild aperient and diuretic, and it is adapted, in conse-

quence, to a large circle of diseases. The springs are near the banks of the Shenandoah, the sound of whose waters is heard with an agreeable effect at the Hotel on the hill, where the visitors are quartered. There are few spots in the Union which present so many natural advantages and capabilities for extended walks, gardens and groves as Shannondale.

Jordan's White Sulphur Springs.—They are about five or six miles from Winchester, and four miles from the railroad between this town and Harper's Ferry. Passengers leaving Baltimore in the morning will reach the springs between three and four o'clock in the afternoon. The waters are serviceable in chronic dyspepsia, with a torpid state of the liver, chronic rheumatism, cutaneous affections, and the debility left by fevers.

Many of the visitors to the upper or mountain springs in the south western part of the State, spend a few days here on their return to the north; and those from the Eastern Shore and Northern Neck linger late in the season, until it is safe for them to go home, with a prospect of escaping an attack of their endemic fevers.

Capon Springs.—These have come greatly into vogue, and it would seem not without good reason. The water is beneficial in certain forms of dyspepsia, and in renal affections, especially, as we are told, in the lithic acid diathesis. The arrangements for cold bathing are on a large scale, and the baths of a superior kind; warm bathing can also be enjoyed by those who claim it, either as a hygienic agent, or a remedy for disease. Mountain air largely inhaled gives a keener relish for the mountain mutton, of which the lovers of good cheer speak so highly at this place. A hotel of the first class has been erected, and furnishes good quarters to a large number of visitors. Not a few have their own houses or cabins.

The Capon Springs are about 30 miles from Winchester. Whether the fear of diminishing the reputation of the water as a medicinal agent, by showing how very slight is its medicinal impregnation, or owing to the indolence of the parties more directly interested in the question, we cannot say; but, as yet, there has been no analysis made, or, at any rate, reported, which has come under my notice.

Fauquier or Warrenton White Sulphur Springs.—They

derive the first name from the county, the second from the town in which they are situated. They are within a few miles of the railroad from Alexandria, and at the same distance from the one to Staunton, which traverses the Valley; and also by stages from Winchester.

The waters are of a mild sulphureous nature, but of the proportion of their gaseous and solid contents we are ignorant. Numerous cases are recorded of their efficacy in dyspepsia, chronic diarrhoea, and chronic rheumatism, also in renal affections and disorders of females; but without very minute specification of the organic lesions in the latter.

Attractions superior even to those of the waters are offered to the crowd of visitors, in a noble mansion, as a hotel, and extensive and tastefully arranged grounds, ornamented with shrubberies and parterres. In addition to the main building, a pavilion, which has a portico on its western front, commanding a view of the lawn, and an extensive picturesque region beyond, there are several brick buildings of a large size. Ample provision is made for all the varieties of bathing.

After traversing the beautiful and fertile region known as the Valley, between the Blue Ridge and the Alleghany mountains, which begins at Harper's Ferry and ends at the Natural Bridge, south of Lexington, we find ourselves in the vicinity of the celebrated "Virginia Springs." We know of no place in the world, of the same extent, which is marked by such a number and variety of mineral and chemical springs as the one now under notice. It possesses, at the same time, the advantages of a fine climate and scenery of a highly diversified character. The company at the several springs, free from aristocratic pretensions and ridiculous attempts at exclusiveness, always exhibits a large share of intelligence, good taste and sociability. The infusion of the Virginian and Southern element—a frank, cordial address and good humor—adds not a little to the pleasures of the Northern visitors, who, with excellent intentions, are not remarkable for that ease of manner and confiding speech which invite intimacy.

Leaving Staunton with a design to visit the "Springs," we shape our course west, and at a distance of 45 miles in this direction we reach

The Bath Alum Springs.—They are on the main road from Richmond to Guyandotte, on the Ohio river, at the eastern base of the Warm Spring mountain, and a few miles east of the Springs themselves.

An analysis of the water of one of the Bath Alum Springs, that most used, by Dr. Hayes, of Boston, shows it to contain, in a gallon, nearly fifty-five grains of saline substances, and of carbonic and sulphuric acid. Those most active, are the salts of iron, and alumina, and on them and the free sulphuric acid, the sensible properties and curative powers of these waters in a great measure depend. Being a strong tonic and astringent, it is easy to indicate a number of diseases in which they must be of service, and, already, experience has proved in many respects what *à priori* reasoning would have suggested respecting their beneficial operation. We may specify, as first on the list, chronic affections of the digestive mucous membranes, including those of the throat, stomach and bowels, and marked by feebleness or imperfection of function and morbid secretions. Similar praise may be extended to it in chronic diseases of the urinary and generative organs, and cutaneous diseases, chronic ulcers, simulating cancers, and scrofula have been greatly relieved, and in some cases entirely cured by the methodical drinking of these waters—a result quickened by their external application to the sore or tumor.

The accommodations for the reception and entertainment of visitors are represented to be of a superior kind at these springs.

Rockbridge Alum Springs.—If, in place of turning off west from Staunton, we were to go further south, to Lexington and the Natural Bridge, and then visit the Warm Springs, we should meet with these alum springs on the road. They are 17 miles from the town just mentioned, and 22 from the Warm Springs, in a valley between the North Mountain on the East, and the Mill Mountain on the West.

The composition of the waters of these Springs, as ascertained by Dr. Hayes, is similar to that of the Bath Alum Waters, and both of them resemble those of the Oak Orchard Springs, and the Acid Byron one in New York. The Rockbridge water is stronger in the proportion of free sulphuric acid and the sulphate of alumina, but contains less iron than the Bath waters. Its

use is applicable to the same diseases in which the other is beneficial, with the modifications required by the differences in chemical composition just now stated.

(To be continued.)

BIBLIOGRAPHICAL NOTICES.

Reports relating to the Sanitary Condition of the City of London.

By JOHN SIMON, F. R. S., Surgeon to St. Thomas's Hospital, and Officer of Health to the City. London, 1854.

These are highly valuable and interesting sanitary reports, although local in their character. Officially addressed to the Commissioners of Sewers of the City of London, and printed originally for the use of the Corporation, nevertheless, they commend themselves to the general reader; especially to those who have given any attention to that most important yet "scandalously neglected" subject, Public Hygiene.

In this age of internal improvement, of scientific research and discovery, of changes and revolutions in daily progress, moving on, too, with a startling rapidity that in some instances would appear almost to outstrip the capabilities of our nature, we cannot comprehend the secret agency that retards the wheels of sanitary reform. It is a fact incontrovertible, that in this country, at least, there has been very little, if any, national legislation towards an effective and permanent sanitary organization. In other words, the cultivation of the science of the physical necessities of human life has received at the hands of our law-makers far less attention than any one subject which has claimed their interference. It is gratifying, however, to find here and there a mind peering out from amidst the universal indifference to those laws and regulations which are necessary to ensure the public health, and willing to devote their talents and influence to the cultivation of the sanitary science.

Prominent among such, beyond the Atlantic, may be noticed the learned author of these reports, whose indefatigable perseverance in advancing the science of Hygiene, entitles him to a distinguished position in the list of philanthropists of the nineteenth century.

In the Preface accompanying this volume of Reports, we are very modestly told, that they "lay no claim to the merit of scientific discovery." Be this as it may, they shadow forth a spirit of enquiry, and evince that philosophical familiarity with the subject, that justly entitles the author to the merit of reducing to practice certain known principles, and of adding many new facts to the domain of the science of Hygiene, for the improvement of the social, moral and physical condition of the human family; or, in his own beautiful language, he has labored "to make trite knowledge bear fruit in common application."

There are five of these reports, beginning with the year 1848 and terminating with 1853. In the fifth and last, the author sums up for this quinquennial period the death rates to the population of the city of London proper, which average about 24 *per thousand per annum*. A high average, when the lowest death rate *per thousand*, attained in England, for a period of seven years, has been 14. Another fact of interest which these statistics reveal, is that for the deaths exceeding five years, the rate is under 17 *per thousand*, while for those under this age, the rate is 85 *per thousand*.

After dwelling upon the abridgement of human life by preventable diseases, the effect of the direct operation of local and preventable *causes*, the author congratulates the Commissioners upon the success attending the public health acts of Parliament, and alludes to the sensible improvement in the sanitary condition of the city, although, he says, "the far greatest evils still remain for correction"—the deaths having been four *per cent.* fewer for equal numbers of population, than previous to the operation of these health acts. Under this head, Dr. Simon concludes by saying, "the approaching institution of your extra mural cemetery, and, I venture to hope, the translation of all slaughtering establishments to the site of your new Smithfield, will be important contributions to the regaining of the allotted duration of human life."

In all these reports, great stress is laid upon the injurious influences upon health of certain trades and occupations conducted in cities, among which, the slaughtering of animals is looked upon as a flagrant nuisance. Any occupation, the author insists, which ordinarily leaves a putrid refuse, ought not, "under any circum-

stances, to be located within a town;" and as to slaughtering animals in cities, he has no hesitation in pronouncing it "as both directly and indirectly prejudicial to the health of the population."

We have long entertained the opinion that any sanitary organization in a city would be incomplete, that allowed the carrying on of noxious trades, particularly those where animal matter, liable to decomposition, was in any way employed. Hence, slaughtering houses, glue and soap factories, tanneries, skin dressing, bone boiling and such like occupations, should be conducted beyond the limits of the population.

A deteriorated and unhealthy atmosphere, or an atmosphere loaded with an organic poison, must necessarily be breathed continually, wherever establishments such as have been enumerated, however well conducted, are located in the midst of a dense population. To preserve a pure and healthy state of the air in cities, all causes that exert an influence to vitiate the atmosphere should be suppressed. This opinion has been materially strengthened since reading the able reports of Dr. Simon, and we are confident that if their contents were carefully analysed and explained by competent authorities in our American cities, we should soon have legislative action, for the mitigation of many fruitful causes that exist for the prevalence of preventable diseases and deaths in cities.

House drainage and house ventilation, are also topics treated of in these essays, both of which require sanitary correction. Of the former, the experience of the author tallies with our own; viz: that imperfect house drainage is a general evil in the poorer districts of cities. It certainly prevails throughout all large cities, but not to the same extent in some districts as in others. Wherever you find a section of the city closely built upon, abounding in small houses, (with smaller yards, and in some cases, no yards at all,) and confined streets and alleys, there you have defective drainage, and with this defective drainage, you have an atmosphere congenial to the production and spread of diseases, epidemic or otherwise.

Under the head of house drainage the author enters into a very minute and efficient examination of the bad effects arising from the existence and accumulation of cesspools in cities, and says,

that "it may be taken as an axiom for the purposes of sanitary improvement, that every individual cesspool is hurtful to its vicinage."

This cesspool question is one worthy of public and scientific attention. None will deny but that, at present, it is a *necessary* nuisance. In London, the evil from this source is alarming. It is bad enough in our American cities, where human ordure is deposited in partially closed, but porous sinks. But in London, according to the report of Dr. Simon, "the extreme injury which it inflicts on the health of the population, and the vital necessity of abating that injury, "has claimed the attention of his countrymen for the last ten years." In some districts he describes the numbers to be so great as resembling a cesspool city excavated beneath the city itself.

It has been a prevalent and favorite idea with us, that the present method of constructing cesspools was hurtful to health, but any improvement on the existing faulty system has been slow to work its way into popular notice.

We should take pleasure in pursuing the subject of Dr. Simon's essays still further, and to present our readers with a more elaborate and detailed notice of their truly useful contents, but the limits of our Monthly forbids other than a hasty glance.

Finally, we would that the same spirit which animates the author of the volume before us, might be infused into the minds of those who have the lead in the municipal affairs of our large cities. The good results that would thereby be effected in the improved system of sanitary enactments, by the adoption of a well regulated *health police*, would be of incalculable benefit.

This collection of reports ought to find a place in all our public libraries, and be put into the hands of the chiefs of each department of the municipal government of our principal cities.

W. J.

An Outline of Medical Chemistry, for the Use of Students. By B. HOWARD RAND, A.M., M.D., Professor of Chemistry in the Philadelphia College of Medicine, etc. Philadelphia: Lindsay & Blakiston. 1855.

This little work is intended as an outline sketch to assist the medical student in acquiring a knowledge of this most necessary

science. It contains an extremely laconic abridgement of the usual systematic course, as met with in the text books most in use in our colleges, attention being more particularly paid to those combinations that are used in medicine, and are officinal in our *Pharmacopœia*, to which work it may form a useful companion in those cases in which the student wishes to obtain a rapid survey of the field of medical chemistry.

The Principles and Practice of Obstetrical Medicine and Surgery, in reference to the process of Parturition, with sixty-four plates and numerous wood-cuts. By FRANCIS H. RAMS-BOTHAM, M. D., &c. A new American edition, revised by the author. With Notes and Additions by WILLIAM V. KEATING, M. D., A. M. &c., Philada. Blanchard & Lea, 1855.

Few reprints from the British press have ever met with more favor from American practitioners than the above work of Dr. Ramsbotham. "Chaste in language, classical in composition, happy in point of arrangement, and abounding in most interesting illustrations," the emphatic language applied to it by Professor Hodge, so well expresses its deserts that we consider it unnecessary to dwell further upon them. The present edition is rendered even more valuable than the previous one, from the additional material published in the interval, so that it may now be considered one of the best summaries of the principles and practice of obstetrics in the English language.

Dr. Ramsbotham devotes a long article, 26 pages, to the history and effects of anæsthesia in labor. "Hitherto," he says, "I fear we have seen too much of the bright side of the picture; the feelings and imagination have been allowed to outstrip the judgment; and the glorious anticipations indulged in have, by their dazzling lustre, unfitted the mind for patient analytical examination. But the period has now arrived, when, from the facts collected, a dispassionate opinion may be formed; when the excitement of the novel, bold and startling idea having passed away, over-zeal may be tempered by discretion, and prejudice corrected by calm, sober, and philosophic reasoning." A discussion of the effects of anæsthetic agents upon the health of both mother and child follows this preamble, which our limits alone prevent us

from giving more in detail. The action of chloroform is divided, upon the authority of Dr. Snow, into five stages or degrees. In the 1st, there is a kind of inebriation, which is usually agreeable, consciousness to surrounding objects, remaining, however, unimpaired. In the 2d the mental functions are impaired, but not entirely suspended; consciousness is no longer correct, and a dreamy state, analogous to delirium, supervenes. The patient is not *dead drunk*, but only in the state described by the law as *drunk and incapable*. In the 3d stage, all voluntary motion is paralysed; the mental functions are completely in abeyance. It does not follow, however, that an operation may be commenced immediately the narcotism reaches this degree, for anæsthesia is not a necessary part of it. The fourth degree brings with it relaxation of the voluntary muscles, with complete insensibility to external impressions, so that no pain is felt even on the infliction of severe personal injuries. The breathing is not unfrequently attended with some degree of stertor. The fifth degree is the *commencement of dying*. Dr. R. argues the great danger of chloroform, from the fact that perfect freedom from pain cannot be expected, unless the fourth degree be induced, when sensibility as well as sensation and muscular motion, is completely destroyed; "two or three more sniffs voluntarily allowed and the fatal gulf is crossed." It is also, a cumulative medicine; its effects increasing after its administration has been discontinued. These and the unequal susceptibility of patients to its influence, and its incompatibility with serious disease of the circulatory or respiratory organs, are the principal reasons brought forward against its use. Besides death, which has assuredly, he says, occurred from its administration, many minor casualties may be apprehended from its action. Three instances of puerperal mania have come within his own knowledge, which were induced by it. Paralysis, hysteria, and epileptic fits are also occasionally caused by it. The condition that must exist before a patient can be rendered oblivious to the sufferings incidental to her situation, he says, emphatically, "is not sleep, but drunkenness; the only kind of sleep, if sleep it can be called, in the least degree analogous to it, is that death-like insensibility into which a person is hurled when stupified by spirituous liquors; a state but little removed from apoplexy; and which indeed in very many instances has

eventuated in a seizure of that dreadful malady." There are only one or two contingencies in which he can even imagine its influence to be applicable. When the foetus lies transversely in utero, the membranes having been ruptured for some hours and the patient obstinately refuses to submit to delivery, he should deem it his duty to employ etherization, taking advantage of its effects to perform the operation. The same principle would guide him in some other operative cases where the forceps were required, and their application perseveringly resisted.

Such are the opinions of our author concerning anæsthesia in labor. It is but proper that we should remark that the American editor enters a warm protest against them. As his experience, however, has been entirely confined to *ether*, while Dr. Ramsbotham's arguments refer to chloroform, we shall not discuss his conclusions.

As we stated previously, the work has been considerably enlarged by the author since the last issue. The additions of the American editor, which cannot, both from their number and value, but prove acceptable to the reader, consist in a description of the inclined planes of the pelvis; generation; signs of pregnancy; foetal circulation; the mechanism of labor; the employment of anæsthetics, to which we have just referred; the use of ergot, &c., and other matters unnoticed by the author. The printing, paper and illustrations deserve the highest commendation.

AMERICAN MEDICAL ASSOCIATION.

TUESDAY, MAY 1st, 1855.

The session was opened at 11½ A.M., by the President, Dr. C. A. POPE, of St. Louis, taking the Chair; Drs. N. S. DAVIS, of Illinois, and John GREEN, of Massachusetts, Vice Presidents, occupied seats on either side; Secretaries, Dr. FRANCIS WEST, of Philadelphia, and Dr. E. S. LEMOINE, of St. Louis.

The President called the Association to order, and announced that the first order of business was the reception of the report of the Committee of Arrangement on the Credentials of Members.

Dr. Hays, Chairman of that Committee, before presenting the report, begged leave on behalf of the medical profession of Philadelphia, to greet the members with a sincere and cordial welcome, and to assure them that every endeavor had been made to affect such arrangements as would facilitate the deliberations of the Association, promote the com-

forts of its members, and render their sojourn in Philadelphia agreeable. This, he stated, was a duty incumbent on the profession of this city and equally a gratification to them to execute. "Eight years," he said "have elapsed since the Association was here organized, and our brethren in every city in which the Association has since met, have received our Delegates with a generous and munificent hospitality which we dare not aspire to rival, and can scarcely hope to approximate. Should our effort then fall short of fulfilling our wishes, I must beg you to, at least, accept the assurance that it is our earnest desire to do everything in our power to demonstrate our profound respect for the assembled wisdom of the noblest of Professions."

Dr. Hays reported that 337 Delegates had already registered, and stated that the Committee of Arrangements were now in session, and busily engaged in the performance of their duties.

As the next order of business was the calling of the roll, Dr. H. hoped that the reading of the report would be dispensed with as unnecessary, which was acceded to.

The roll was then called by the Secretary, Dr. West, 337 Delegates answering to their names.

The President, Dr. Chas. A. Pope, being, on motion, invited to address the Association, spoke as follows:

[We omit the first part of the address.]

The object of this Association is to do something to advance the profession towards the far-distant goal of perfection—to aid the solution of some of the problems and enigmas of life and organization—to add some material to the growing temple, whose foundations were so firmly laid by the Coan sage—and to do its part, as best it may, in the cause of humanity. Nor do I think that, so far, it has altogether failed. Many valuable contributions to science have been elicited—professional ambition has been stimulated, an *esprit-de-corp*s has been successfully evoked and established. The strength of the profession has acquired additional power by the union of its members. This association has been to physicians what the railroad and electric wires are to commerce, and the interchange of useful knowledge to States and nations. It has made us one, and, as I have just remarked, in unity there is power.

This association has stimulated thought. Chaotic and void would forever remain the masses of facts, accumulated by the observations of ages, but for the co-ordinating and logical power of reason. It sits in judgment on the silent phenomena, as a "refiner of fire, and a purifier of silver." It forces the voiceless facts to mount the tripod of the oracle, and speak forth words of wisdom. The scalpel, the crucible, the microscope, may be subsidiary to its purposes and ends, but they cannot supply its place. Fixed and patient thought in medicine, as in the other departments of science, is the Aladdin's lamp that lights the footsteps of the discoverer. To stimulate attention and thought, is to accelerate many a new discovery, to hasten the advent and establishment of important principles yet in the womb of the future. May not our Association do this more effectually than it has hitherto done?

Let all the contributions be read and attentively considered. Such a course would certainly be more encouraging, as well as more respectful, to their authors. Let the reports be deliberately and fully discussed, and let them go forth to the world with the sanction or the criticisms of the Association. This would require time, it is true, but if we have time to meet at all, surely a few days would make but little difference. The good that would be effected would yield a ten-fold compensation for the time employed. Every one must admit that three or four days is too short a time for the Association rightly to fulfil its annual mission.

I would, moreover, respectfully suggest that time be taken for the discussion of some of the leading topics of medical philosophy. Amongst these, may be mentioned the nature, causes and treatment of cholera, yellow fever, et cetera—Hygiene, and the laws of health affecting masses of men—Quarantine—the causes of mortality among children—the chemical and vital doctrines of life. Questions like these, indicated a year in advance for discussion, would excite a carefulness of investigation, and a degree of attention and thought, which could not fail to clear away much of the darkness and doubt in which they are yet shrouded. Nothing so sharpens the intellectual powers as public debate. It fixes attention, and strains to the utmost every faculty. I have no hesitation in saying that facts enough have been accumulated to establish great and general principles, of which the medical world is yet in ignorance or doubt. Nothing would contribute more to demonstrate these principles than the collision of matured intellects in public debate. What a mass of facts and arguments and demonstration would be brought to bear on any of the subjects alluded to, if some of the best minds in the profession were to debate them, after a year's preparation! Observed facts are the crude materials of science—the intellect is the master builder of its august temple.

I make these suggestions for your consideration. All the scientific meetings in this country and in Europe, employ more time than ours has hitherto employed. Evidently we must protract our sessions, if we would render them as serviceable to science as they may be. No member of the Association will be required to remain longer than suits his wishes or convenience. Some fifty or sixty, more or less, would always be found to listen with eagerness to scientific papers, and engage with pleasure in scientific discussions.

The time has probably arrived for a change in our plan of organization, which will admit of the selection of a permanent place for the future meetings of the Association. There are evident advantages incident to both the migratory and stationary plans. These might, perhaps, be easily reconciled and secured. A proposition, if I mistake not, was made some years ago, by the Smithsonian Institution, and I would respectfully suggest, whether it would not be in accordance with the best interests of the Association, to hold biennial meetings in Washington, and the alternate ones, as now, at different points of our common country. We might thus secure all the advantages of a fixed abode, in the way of preserving the archives, making collections, etc., whilst by meeting in various localities, we could not fail to excite that wide-spread

interest among the profession, and obtain such accessions of new members as would greatly enhance the high and useful objects of our Association. Should this proposal meet with your approbation, I would further intimate, that policy would perhaps require the meetings of the Association at the National Capital, to be held in the years of the short sessions of Congress.

I shall say but little of the legislative duties of the Association. I shall say nothing of the propriety or impropriety of getting laws passed to regulate the practice of medicine, and furnish standards for candidates for the doctorate. Perhaps the Association can do but little in this respect. Ours is a popular government, and the people are disposed to allow the largest freedom in everything pertaining to medicine, medical schools and physicians. Laws passed against quackery one year are revoked the next. Our country is the paradise of quacks. All good things have their attendant evils, and this unbridled liberty is one of the evils of a popular government. May we not hope, however, that even this evil may disappear, as general education and the cultivation of the masses advance? At any rate, the people are not yet dispossd to put down the quacks, nor to require too high a degree of qualification for those of the regular profession. After all, laws can make only mediocre physicians. They can require the candidates to know only so much—to be qualified to a certain degree; and this degree will always be far lower than that to which the true lovers of knowledge would attain, without any legislation on the subject. The greater lights of the profession cannot be manufactured after any process of legislative enactment. Thirst of knowledge, self love, philanthropy, burning ambition—these make the great physician and surgeon. These have made all the worthies of the past—not legislation. Legislation cannot drive the drone to the proud heights of professional eminence. When these heights are reached, it will be seen that the successful aspirant has been stimulated by a stronger power.

To him the laurel blossoms of renown and the life-giving mission of his art, are dearer and more attractive than was the mystic bough of the sibyl to the eager *Aeneas*, or than the golden apples, guarded by sleepless dragons, to the Hesperian daughters.

What ever course you may think proper to pursue, I am sure that your objects will be, the advancement of science—the good of mankind—the honor and glory of the profession. We have the dignity and character of a noble calling to sustain—of a profession which has numbered, for two thousand years and more, some of the wisest and best men in all countries and all times. It is no trivial matter to sustain the rank and respectability of a vocation which can boast of a *Hippocrates*—a *Harvey*—a *Hunter*—of the most erudite and beneficent of sages and philanthropists the world ever saw—of a profession which has furnished to every nation its *clarum et venerabile nomen*.

On the eve of the battle of the pyramids, Napoleon exclaimed—“*Soldiers! from the height of yon monuments, forty centuries look down upon you.*” Gentlemen, from the heights of past ages, countless worthies of our God-like profession point and beckon to a goal more

elevated than that which attracts legislators and conquerors, Solons and Cæsars.

On motion of Dr. J. B. Biddle, the thanks of the Association were tendered to the President, Dr. Pope, for the able and eloquent address just delivered ; and that a copy of it be requested for publication.

Dr. Hays stated that the Committee of Arrangements had agreed upon certain arrangements which would need the consent of the Association. He moved that the sessions of the Convention be held from 9 A.M. to 3 P.M., with one hour recess each day, from 12 M. to 1 P.M. Agreed to.

Dr. Hays then stated it was proposed by the Committee of Arrangements that the members of the Association should visit *this* afternoon the Pennsylvania Hospital for the Insane ; on *Wednesday* afternoon, Girard College and Fairmount ; on *Thursday* afternoon, Philadelphia Hospital, Blockley ; on *Friday* afternoon, the Asylum for the Blind ; and that arrangements had been made for conveying the members to those institutions.

Dr. Hays further stated that the Mayor of the City invited the Association to a reception at Independence Hall, at noon on Wednesday ; and that invitations had been extended to the members to visit, at their convenience, the principal Public Institutions of the city, to all of which admission would be had on exhibiting their cards of membership.

Dr. J. B. Biddle moved that a recess be taken to allow the nomination of one from each State to serve as a committee to report nominations for permanent officers of the Association. Agreed to. The Association then took a recess, while the delegations assembled in various parts of the room.

Upon the re-assembling of the Association, Dr. D. F. Condie moved that all permanent members who, through want of notification, had not paid the amount for which they were assessed, but who had subsequently paid, be reinstated as permanent members of the Association.

Dr. Watson moved to amend the motion as follows :—

Resolved, That no member of the Association shall be deprived of his privilege as a permanent member by not contributing to pay the expenses of an annual meeting at which he is not present.

Dr. White, of Buffalo, moved that the whole subject be referred to a committee of three. Agreed to.

The Chairman appointed Dr. White, of Buffalo, Dr. Watson, of New York, and Dr. Condie, of Philadelphia.

The names of the different States were then called, each one reporting the name of its representative on the nominating committee as follows :

Committee on Nominations.

Maine.—A. J. Fuller.

New Hampshire—Silas Cummings.

Vermont.—G. T. Elliott.

Massachusetts.—C. P. Fiske.

Rhode Island.—Jos. Mauran.

Connecticut.—P. A. Jewett.

New York.—John McCall.
Pennsylvania.—J. B. Biddle.
New Jersey.—Lewis Condict.
Delaware.—James W. Thompson.
Maryland.—Charles McGill.
District of Columbia.—Thomas Miller.
Virginia.—R. B. Welford.
South Carolina.—P. C. Gaillard.
Georgia.—Richard D. Arnold.
Alabama.—P. H. Cabell.
Tennessee.—J. Berrien Lindsley.
Kentucky.—C. J. Blackburne.
Ohio.—R. Hills.
Indiana.—Joel Pennington.
Illinois.—J. V. Z. Blaney.
Michigan.—A. B. Palmer.
Missouri.—L. P. Perry.
Iowa.—J. E. Sandbourne.
Wisconsin.—J. B. Dousman.
North Carolina.—O. F. Manson.

Dr. F. C. Stewart, of New York, offered the following resolution:

Resolved, That the Nominating Committee be instructed to present three names to the Association as candidates for the office of President, who shall be elected by ballot; and the candidate who shall have the smallest vote, shall be withdrawn after the first ballot.

It was moved that the resolution be laid upon the table. Agreed to.

On motion of Dr. Atlee, it was Resolved, that the Nominating Committee be instructed to recommend a place for holding the next annual meeting of the Association.

Invitations to this effect were extended respectively by Dr. Pitcher, of Michigan, on behalf of the medical profession of Detroit; by Dr. Foster, of Tennessee, on behalf of the profession of Nashville; and Dr. Brainard, of Illinois, on behalf of the profession of Chicago. These invitations were, on motion, referred to the Committee on Nominations.

Dr. F. A. Ramsay moved that so much of the President's address as relates to the place of holding meetings of the Association, be referred to the Committee on Nomination.

Dr. D. D. Thompson, of Kentucky, moved that the regular order of business be dispensed with, to take up the amendments to the Constitution offered at the last annual meeting.

Several members objected, and the motion was lost.

The next business in order was the reception of "members by invitation."

On motion of Dr. Condie, the names of all "members by invitation" were referred to the Committee of Arrangement.

The President announced that the next business in order was the Reports of the different Standing Committees, appointed at the last annual meeting.

A report was received, through Dr. La Roche, from the Committee

on Prizes. The report stated that the Committee had received six essays in competition for the Prize offered by the Association. But, although these essays evinced much ability and extensive learning, but one was decided to possess those qualities which deserved the award of the prize. The essay was entitled "Statistics of Placenta Praevia." The name of the author was announced as Dr. James D. Trask, of White Plains, New York. [Applause.]

On motion of Dr. Condie the report was accepted, and the Prize Essay was referred to the Committee on Publication.

Dr. Thomas Reyburn, Chairman of the Committee on Epidemics of Missouri, Iowa, Illinois and Wisconsin, submitted a voluminous report, the abstract of which occupied a long time in reading.

On motion, the report was referred to the Committee on Publication.

Dr. White, from the committee to whom was referred the resolutions in regard to the permanent members, submitted a report, recommending the adoption of the following resolutions:

Resolved, That upon no permanent member, who is not present at a meeting of the Association, shall be assessed the annual contribution; but no one shall be entitled to receive a copy of the printed *Transactions* unless he pay into the treasury a sum not less than the annual assessment paid by the delegates and permanent members in attendance; and that all the names of permanent members that have been left off the published list, be reinserted therein in the next volume of *Transactions*.

Resolved, That no assessment whatever shall be made against members by invitation, but that they also be entitled to a copy of the printed *Transactions* by paying the sum assessed upon delegates in attendance.

Dr. Sanford B. Hunt, of Buffalo, N. Y., from the Committee on the Hygrometrical State of the Atmosphere in various localities, and its influence on health, submitted a report; pending the reading of which the hour of adjournment arrived, and the Association adjourned to meet to-morrow morning at nine o'clock.

SECOND DAY, MAY 2d.

The Association assembled at 9 o'clock. The minutes of the meeting of the preceding day were read and approved.

Dr. Condie moved that the Secretaries of this Association be requested to afford every facility possible to the reporters of the public press, to enable them to furnish full and accurate reports of the transactions.

Dr. Atlee, of Lancaster, asked and received permission to make a statement. At the meeting of the Association at Richmond, a resolution was passed, authorizing the appointment of a committee to procure a suitable stone for the Association to contribute to the Washington Monument, at Washington City, D. C. The Committee had made an assessment of \$1 upon each member to purchase the stone and pay for the sculpture. Dr. Pierson, of Salem, Mass., had recommended as a design for the sculpture, "Hippocrates refusing the bribe offered by the King of Persia to visit the Court of that Prince, and give medical aid to the subjects of his Empire—when the great father of medicine said—'Tell your master that I am rich enough; that honor will not allow me to succor the enemies of Greece.'"

The sculpture was executed by a young man named John Augustus Beck, only twenty-two years of age. Eminent artists speak very highly of the work, which gives great promise of future eminence. Mr. Beck has been encouraged to go to Italy for study.

A resolution was offered, to the effect that no member should speak unless his name and residence were announced. Adopted.

Dr. J. B. Biddle, the Chairman of the Committee on Nominations, reported the following unanimous nominations:—

President.—GEO. B. WOOD, M.D., of Pennsylvania.

Vice Presidents.—WM. M. BOLING, of Alabama; DANIEL TILDEN, of Ohio; D. HUMPHREYS STORER, of Massachusetts; GRAFTON TYLER, of the District of Columbia.

Secretaries.—FRANCIS WEST, of Pennsylvania; R. C. FOSTER, of Tennessee.

Treasurer.—CASPAR WISTER, of Pennsylvania.

Committee on Publications.—FRANCIS G. SMITH, of Pennsylvania, Chairman; FRANCIS WEST, of Pennsylvania; SAMUEL L. HOLLINGSWORTH, of Pennsylvania; H. S. ASKEW, of Delaware; SAMUEL LEWIS, of Pennsylvania.

The committee also recommended, but not unanimously, Nashville, Tennessee, as the next place of holding the annual meeting.

On motion of Dr. Post, of New York, it was

Resolved, That the question of the confirmation of the officers, and of the place of meeting, be taken separately.

So much of the report as related to the nomination of officers, was then, on motion of Dr. Rogers, of Pennsylvania, adopted.

On motion of Dr. White, of New York, it was

Resolved, That a committee of five be appointed to inform the President and Vice-Presidents elect, of the choice of the Association, and to conduct them to their respective seats.

The chair appointed Drs. J. M. Smith, of New York; Blackburne, of Kentucky; Homans, of Massachusetts; Rouse, of Illinois; and Frost, of South Carolina. The officers were then conducted to their seats by the committee.

On taking the Chair, the President, Dr. Wood, expressed in a neat speech, his thanks to the Association for the honor conferred upon him.

On motion of Dr. Biddle, of Pennsylvania, the thanks of the Association were tendered to the retiring President, Dr. Charles A. Pope, for the able and efficient manner in which he had discharged his duties.

Dr. Post, of New York, moved that the next place of meeting be the City of Washington.

Dr. Watson, of New York, moved, as an amendment, to substitute the City of Detroit for Washington.

Dr. L. A. Smith, of New Jersey, moved, as a further amendment, the substitution of Nashville for Detroit.

After some discussion, Detroit was selected as the place for the next meeting.

Dr. Foster, one of the newly elected Secretaries, tendered his resignation, which was, on motion, accepted.

Dr. Brodie, of Michigan, was then chosen to fill the vacancy.

The further consideration of the report of Dr. Sanford B. Hunt, of New York, upon the Hygrometrical State of the Atmosphere in various localities, was resumed.

Dr. Hunt read an abstract of his report, which was very interesting, and was listened to with a great deal of attention. It abounded in facts and statistics, illustrating the influences of the changes in the atmosphere, particularly with reference to epidemics, and deduced several laws as governing a certain class of epidemics.

On motion, the report was referred to the Committee on Publication.

Dr. Frank H. Hamilton, of Buffalo, N. Y.; then submitted a report upon the Frequency of Deformities in Fractures. The report was accompanied with voluminous statistics. The main object of the report was the demonstration of the impossibility of the union of fractures without distortion.

Dr. Hamilton said he had a word to say, but not in connection with the report. It was necessary to do something to arrest the frequency of the prosecutions for mal-practice. The frequency of these prosecutions no longer surprised the members of the profession. They had become familiar. What occasions this frequency? Is it because there are jealous and designing men among the profession? There are a few, no doubt. But, upon the whole, no profession stands by itself as well as the medical profession. Is it the fault of the lawyers? Lawyers occasionally might have something to do with encouraging the prosecutions; but this would not account satisfactorily for the evil complained of. The speaker thought the reason could be found in the imperfection of the art, and the reluctance of the profession to admit those imperfections. Members would assure the world, for instance, that a fractured femur could be united without shortening the limb—which was simply impossible. He trusted that the profession would be wiser in the future, and acknowledge that they could not perform impossibilities. Even that city of medical science, Philadelphia, had not produced a book which could instruct physicians how to unite a fractured femur without shortening the limb.

The report was referred to the Committee on Publications, and the Committee, at the request of Dr. Hamilton, continued.

Dr. Charles Hooker, of New Haven, Conn., submitted a report upon "Diet for the Sick." The report lays down laws for the government of diet under various diseases, and specifies particular articles which may be given with benefit. Referred to the Committee on Publications.

On motion, a resolution was adopted, returning the thanks of the Association to the retiring Vice Presidents, Secretaries and Treasurer.

An invitation to visit the Central High School to-day, at noon, was accepted.

A resolution was adopted, returning thanks to railroad companies that had given commutation tickets to members of the Medical Association.

On motion of Dr. Hintze, it was

Resolved, That a committee of one from each State be appointed by the chair to use their influence with the railroad and steamboat companies, in their respective States, to issue commutation tickets to the delegates to the American Medical Association, and their immediate families, who may design attending the meeting of the Association in May, 1856.

The following were appointed the committee:—

Maine.—E. R. Peaslee.

New Hampshire.—Josiah Crosby.

Vermont.—J. Perkins.

Massachusetts.—J. Homans.

Rhode Island.—Joseph Mauran.

Connecticut.—P. A. Jewett, *Chairman*.

New York.—James P. White.

Pennsylvania.—Francis West.

New Jersey.—Lyndon A. Smith.

Delaware.—James W. Thompson.

Maryland.—F. E. B. Hintze, *Sec.*

District of Columbia.—Grafton Tyler.

Virginia.—B. R. Wellford.

North Carolina.—O. F. Manson.

South Carolina.—R. F. Michel.

Georgia.—Richard D. Arnold.

Alabama.—William M. Boling.

Tennessee.—J. B. Lindsley.

Kentucky.—C. J. Blackburne.

Ohio.—Daniel Tilden.

Illinois.—Rudolphus Rouse.

Missouri.—Charles A. Pope.

Iowa.—J. E. Sanborn.

Wisconsin.—J. R. Bartlett.

Michigan.—Zina Pitcher.

On motion, the Association adjourned to Independence Hall.

The Medical Association at Independence Hall.—About five minutes past twelve o'clock, the members of the Association entered Independence Hall. A number of ladies were already present, and the Hall was soon crowded to its utmost extent. [We have not space to publish the eloquent speeches of Dr. Hays and Mayor Conrad.]

AFTERNOON SESSION, 1 P. M.

On motion of Dr. Davis, of Illinois, the thanks of the Association were tendered to the Mayor of Philadelphia for the very cordial manner in which he had received the American Medical Association at Independence Hall, and that a copy of his eloquent speech be published in connection with the proceedings of the Association.

On motion of Dr. Askew, of Delaware, the rules of order were suspended for the purpose of allowing Dr. J. W. Thompson, of Delaware, to offer the following preamble and resolutions:—

Whereas, That as few subjects of greater interest and importance could be presented to the consideration of the American Medical Association, now representing most of the States and Territories of the Union, than the attainment of a correct Medical Topography of each, with a history of its prevailing fevers and most successful treatment of the same, therefore be it

Resolved, That with this view and conviction, this Association appoint a Special Committee for each State and Territory represented, of —, members whose duty it shall be to report upon its medical topography epidemic fevers and most successful treatment thereof, and that the same shall continue to hold their office for three years.

Resolved, That as other States and Territories not now represented, become so by delegates duly appointed to this National Association; that similar committees shall be appointed for like purpose, and that they also shall hold their office for three years.

Resolved, That in the appointment of gentlemen of education and experience in the affairs of their own State, we have the best guarantee that the important objects we seek will be more satisfactorily accomplished, and the profession as well as the public interest will thereby be better served.

Resolved, That the committees heretofore appointed by this Association, at its session in Charleston, for a similar object, be, and the same are hereby discharged.

On motion of Dr. Askew, of Delaware, the foregoing preamble and resolutions were ordered to lie on the table and made the special order for to-morrow at 10 o'clock.

The Committee on Publication submitted their report. The seventh volume of the proceedings of the Association was issued last November, 1000 copies being published, at an expense of \$1806 42; 781 copies have been sold or furnished to members of the Association; 35 were given to editors of medical journals, and 184 remain on hand.

In view of the delay in publication which is liable to be occasioned by the reference to the Committee on Publication, of reports and other papers of which abstracts alone are presented to the Association, the committee recommended for adoption the following resolution:

Resolved, That hereafter, beginning with the session for 1856, no report or other paper shall be entitled to publication in the volume for the year in which it shall be presented to the Association, unless it be placed in the hands of the Committee on Publication on or before the first of June.

Dr. Biddle, of Pennsylvania, offered the following resolution, which was adopted:—

Resolved, That the thanks of the Association are eminently due to the Committee of Publication for the faithful and highly satisfactory manner in which their arduous and responsible duties have been discharged.

The Treasurer submitted his annual report:

Balance in the Treasury at last account,	\$293 99
Assessment and Sales of Transactions,	2722 31½
Prize Fund,	200 00
Total,	3216 30½

Balance in Treasurer's hands at present, \$1115 26

A resolution was adopted, appropriating the sum of \$1000 to pay for the stone for the Washington Monument.

Dr. Duhamel, of Washington City, offered a preamble and resolutions returning the thanks of the Association to those Senators and Representatives who took an interest in procuring the passage of the Quarantine bill, the object of which is the better prevention of the introduction of diseases into the country.

The resolutions were adopted.

The Secretary read a paper from Dr. Wm. H. Byford, of Evansville, Indiana, upon Serofula. This paper gives an account of the nature of the disease, its varieties, causes, effects, and treatment. Referred to the Committee on Publications.

Dr. N. S. Davis, of Chicago, Ill., read a paper upon "The Nutritive Qualities of Milk, and the Influence produced thereon by Pregnancy and Menstruation, in the Human Female, and by Pregnancy in the Cow; and also on the question whether there is not some mode by which the nutritive constituents of milk can be preserved in their purity and sweet-ness, and furnished to the inhabitants of cities in such quantities as to supersede the present defective and often unwholesome modes of supply." In this report, the various methods of preserving milk are all investigated and explained, and the preference given to that discovered by a gentleman of Rochester, New York. By this method, milk had been preserved for twelve months, with all its nutritive qualities. The solidified milk, prepared by that gentleman, was decided to be the article that had long been a desideratum. Referred to the Committee on Publications. The committee was continued.

The hour of adjournment having arrived, on motion, the Association adjourned.

THURSDAY, MAY 3, 1855.

The Association assembled at 9 A. M., the President, Dr. Wood, of Pennsylvania, in the chair.

The minutes of the last meeting were read and approved.

The President stated that it had been usual to refer the appointment of the various standing committees to the Committee on Nominations. Whereupon, on motion of Dr. Watson, of New York, it was

Resolved, That these appointments be referred to that Committee.

Dr. Hays, of Pennsylvania, presented an invitation from Dr. Ducachet, Rector of St. Stephen's Church, to visit that church and view the "Burd Monuments" therein.

The invitation was accepted, and 12 M. to-day appointed as the time for the visit, and the thanks of the Association directed to be tendered to Dr. Ducachet.

Dr. Hays also presented an invitation from the Principal and Managers of the Training School for Idiotic and Feeble-minded Children, to visit that Institution on Friday afternoon next. Invitation accepted, and the thanks of the Association directed to be returned for the invitation.

A letter was read from Dr. E. B. Haskins, of Clarkesville, Tennessee, the Chairman of the Committee on Microscopical Investigations of Malignant Tumors, stating that he had not the means of carrying out the object of the Committee, and asking to be discharged, which was agreed to.

A communication was read from Dr. Reyburn, of Mississippi, suggesting that the District, composed of Missouri, Illinois, Wisconsin, and Iowa be divided, and also offering his resignation as Chairman of the Committee appointed to report upon the epidemic of those States, and on motion of Dr. Askew, of Delaware, it was

Resolved, That so much of said communication as refers to the division of districts be referred to the Committee on Nominations, and that the resignation of Dr. Reyburn be accepted.

The Committee on plans of Organization for State and county societies, Dr. A. B. Palmer, of Michigan, chairman, was called, when the chairman stated that the Committee was not prepared to report.

Committee on Medical Literature, Dr. R. J. Breckenridge, of Kentucky, Chairman, was called, when a letter was read from the chairman, stating his excuses for not having his report prepared, and, after considerable discussion, the committee was continued.

Committee on Medical Education, Dr. Wm. H. Anderson, of Alabama, Chairman, was called on, when a letter was read from the chairman, stating his reasons for not having his report ready, and asking to be continued.

After some discussion upon the general question of the propriety of continuing committees who failed to present their reports in time, on motion of Dr. J. L. Atlee, of Pennsylvania, it was

Resolved, That the further consideration of the subject be postponed in order to receive the report of the Committee on Nominations.

Dr. J. B. Biddle, Chairman of this Committee, made the following report:—

The Committee on Nominations, to which was referred the resolutions in reference to the appointment of a Committee on Medical Topography and Epidemics, report the resolutions, with a recommendation that they be adopted.

They recommend the following gentlemen to compose the committee of one from each State and Territory, to be appointed in accordance with the resolutions, viz:—

Maine—J. C. Weston, of Bangor.

New Hampshire—Edmund R. Peaslee, Dartmouth College.

Vermont—Joseph Perkins, of Castleton.

Rhode Island—Joseph Mauran, Providence.

Connecticut—Charles Hooker, New Haven.

Massachusetts—George C. Shattuck, Boston.

New York—Joseph M. Smith, New York.
New Jersey—Lyndon A. Smith, Newark.
Pennsylvania—Jacob A. Gemmil, Huntingdon County.
Delaware—James W. Thompson, Wilmington.
Maryland—Peregrine Wroth, Chestertown.
Georgia—John F. Posey, Savannah.
Virginia—P. F. Peebles, Petersburg.
District of Columbia—Thomas Miller, Washington.
South Carolina—D. J. Cain, Charleston.
North Carolina—O. F. Manson, ——
Kentucky—Wm. L. Sutton, Georgetown.
Tennessee—E. B. Haskins, Clarkeville.
Louisiana—E. D. Fenner, New Orleans.
Minnesota—J. H. Murphy, St. Anthony's Falls.
Ohio—G. Mendenhall, Cincinnati.
Mississippi—T. J. Grafton, Rodney.
Missouri—S. B. Alleyne.
Michigan—J. H. Beech, Cold Water.
Alabama—S. W. Chanton, Warsaw.
Illinois—John Evans, Chicago.
Indiana—Vierling Kersey, Milton, Wayne County.
Wisconsin—Alfred L. Castleton, Delafield.
Iowa—E. A. Arnold, Davenport.
U. S. Navy—Thomas Dillard, Philadelphia.
U. S. Army—Clement A. Finley.

The committee report that, in their opinion, it is inexpedient to make any change in the Constitution in regard to the time and place of meeting of the Association.

A number of Special Committees were appointed, and the following

STANDING COMMITTEES.

Committee on Arrangements—Dr. Zina Pitcher, of Detroit; Dr. Moses Gunn, do.; Dr. A. S. Leland, Dr. Moses Stewart, Dr. Peter Klein, Dr. J. A. Brown.

Committee on Prize Essays—Dr. A. B. Palmer, of Michigan; Dr. Samuel Denton, Dr. A. R. Terry, Dr. Adam Sager, Dr. S. H. Douglass, Dr. Corydon La Ford, Dr. E. Andrews.

Committee on Medical Literature—Dr. P. C. Gaillard, of South Carolina; Dr. N. P. Monroe, of Maine; Dr. James Couper, of Delaware; Dr. R. Hills, of Ohio; Dr. A. Coffin, of South Carolina.

Committee on Medical Education—Dr. J. Berrien Lindsley, of Tennessee; Dr. J. B. Flint, of Kentucky; Dr. P. H. Cabell, of Alabama; Dr. George Hayward, of Massachusetts; Dr. E. B. Smith, of Missouri.

On motion, the report of the committee was adopted.

The subject of the report of the Committee on Medical Education was taken up, and after considerable discussion Dr. Lindsley, the chairman of the newly-appointed committee on the subject, asked leave to

resign, and that Dr. Anderson, of Alabama, chairman of the former committee, be appointed in his place.

Dr. Lindsley's resignation was accepted, and Dr. Anderson appointed in his place.

A letter from Dr. W. Hooker, Chairman of the Committee on the Epidemics of New England and New York, was read, in which he points out the defects of the present organization of the Committee on Epidemics, and asking to be discharged from further consideration of the subject.

On motion of Dr. Hays, the letter was referred to the Committee on Nominations.

Dr. F. H. Hamilton, of New York, asked and obtained leave to make some remarks on fracture of the clavicle, supplementary to his report made yesterday.

The special order of the day, the resolutions in reference to the appointment of Committees on Medical Topography, offered by Dr. Thompson, of Delaware, was taken up.

After some remarks by Dr. Thompson, advocating their adoption, Dr. Askew, of Delaware, offered the following additional resolution, which was accepted by Dr. Thompson:—

Resolved, That all reports on the Medical Topography and prevailing diseases of the States, shall, to entitle them to be received by this Association and published in the Proceedings, be first approved by the medical societies of the State or Territory where such Societies exist, and to which State or Territory such report refers.

The preamble and resolutions were then adopted.

Dr. J. G. Orton, of Binghamton, New York, read a series of resolutions which he had prepared in reference to the same subject. They were as follows:—

Resolved, That each County Medical Society (or, in parts of the country where such societies have not been established, any duly organised medical association), be invited to amend their constitutions by attaching thereto the following article: "It shall be the duty of each member of this Society to keep a faithful record of the diseases which may fall under his observation during each month, according to the classification adopted by this Convention in May, 1847, stating the age, sex, occupation and nativity of the patients, the average duration of the disease, and, finally their recovery or death, and to report the same in writing to the Secretary, on or before the first day of February of each year, who shall transmit a digest thereof to the State Medical Society, and also to the appropriate committee appointed by the American Medical Association for its reception."

Resolved,—That each incorporated Hospital, Infirmary, and Asylum, be invited to furnish a copy of their annual reports for the use of the committees of their respective States.

Resolved, That the State Committee appointed by this Association to report upon the prevailing diseases of their respective localities, shall receive and arrange a digest of the reports transmitted by them to the Secretaries of the various county societies, and report the same at the annual meeting of this Association.

Resolved, That the first day of January be the time fixed at which the object of these resolutions shall be carried into effect, and that the several county societies and associations be requested to amend their constitutions as heretofore recommended, at as early a date as practicable, and to report to the State Committee their willingness or unwillingness to acquiesce in the request of this Association.

On motion, the resolutions in reference to this subject were referred to the Committee on Nominations.

On motion of Dr. J. L. Atlee, of Pennsylvania, the Chief Justice of the State, the Hon. Ellis Lewis, who was present, was invited to take a seat on the platform.

The President stated that Dr. D. J. Cain, appointed to report on the epidemics of South Carolina, Florida, Georgia and Alabama, was confined at home by sickness.

The Committee on the Epidemics of Tennessee and Kentucky, not being ready to report, was continued.

A letter was read from Dr. Fenner, appointed to report on the epidemics of Louisiana, Mississippi, Arkansas, and Texas, stating that his report was in progress.

On motion, the committee was continued.

Dr. D. Francis Condie, to whom was referred the subject of tubercular disease, stated that he had been engaged for a period of nearly three years in examining and arranging a report on this subject. The report will occupy at least five hundred pages, and one reason which has caused it to swell to so great an extent, is, that he found it necessary to contradict a large number of statements and reports on the subject. He hoped that the Association would excuse him in not being quite ready with his report. He had prepared a digest of its contents, which in fact is merely an index to the whole, and would not of itself repay for the time used in reading it. He expressed a desire that the Association would excuse him.

Dr. Altee moved that Dr. Condie do just as he please, with his paper, without any obligation he may consider himself under to the Association. The motion was agreed to.

The Committee on Dysentery, Dr. Henry Taylor, of Mt. Clemens, Michigan, chairman, presented, through Dr. Beech, an abstract of the report which was read, and, on motion, the report was referred to the Committee of Publication.

The Committee on Hydrophobia and the Connection of the Season of the Year with its Prevalence, Dr. T. W. Blatchford, of New York, chairman, presented a partial report, which was read, and, on motion of Dr. Smith of New York, the committee was continued.

The hour for recess having arrived, Dr. Hays, on behalf of the Committee of Arrangement, begged to state that St. Stephen's Church, in which were the beautiful monuments by Steinhauer to the Burd family, was open for the inspection of the members of the Association, as were also the Galleries of the Academy of Fine Arts, the Museum of the Academy of Natural Sciences, and the Museums of the different Medical Colleges, and invited the members to visit them. He also reminded

the members that this was the time appointed to visit the High School, and such as desired to do so could visit that useful Institution.

MAY 3—1 P. M.

Association reassembled, the President, Dr. Wood, in the Chair.

Dr. R. D. Mussey, of Ohio, the Committee to examine into, and report upon, the effects of Alcoholic Liquors upon the system in health and disease, read his report, which was, on motion, referred to the Committee on Publication.

On motion of Dr. Thomas, of Maryland, the resolution referring the report on Medical Literature to the Committee of Publication was reconsidered, when, on motion of Dr. Gibson, of Virginia, the further consideration of this subject was postponed until to-morrow.

On motion of Dr. Jewett, of Connecticut, it was

Resolved, That a Committee of one from each State be appointed to report upon a uniform system of marriages, births and deaths, which resolution was referred to the Committee of Nominations, to report the names of the Committee.

The hour of adjournment having arrived, Dr. Hays, on behalf of the Committee of Arrangements, stated that omnibuses would be in waiting at 4½ P. M., to convey the members and the ladies of their party to the Philadelphia Hospital, Blockley.

The Association then adjourned.

FRIDAY, MAY 4, 1855.

The Association met this day at 9 A. M., the President, Dr. Wood, of Philadelphia, in the Chair.

The minutes of the last meeting were read and approved.

Dr. Atlee offered a resolution that Dr. Breckenridge's report on Medical Literature be referred to a special committee, to be read, and if approved by said committee, then that it be referred to the Committee on Publication. The motion was lost.

A motion was then made and adopted, that the Committee on Medical Literature be continued to report at the next meeting of the Association.

Dr. Hayward, of Boston, offered the following, which was adopted unanimously:—

Resolved, That the thanks of this Association be presented to his Honor the Mayor, and the other officers of the city government, and the citizens and physicians of the city of Philadelphia, for their kind and continued attentions, and munificent hospitality to the members of this Association during its present session.

Dr. J. L. Atlee, of Pennsylvania, presented and read a report, on behalf of the committee appointed at the last annual meeting of the Association, and to which was referred the essay of Dr. Phelps, of New York, on "Religion as an Element in Medicine, or the Duties and Obligations of the Profession," and also the communication of Dr. R. S. Bailey of South Carolina, on the same subject, with instructions to consider and report on the expediency of publishing the same. The report was accompanied by the following resolution:—

Resolved, That it is inexpedient to publish in our *Transactions* the Essay of Dr. Phelps.

The committee state that, having expressed their sentiments on the subject, they beg to be discharged from the further consideration of Dr. Bailey's paper.

After a brief discussion, the previous question was demanded and sustained, and the report was accepted, the accompanying resolution adopted, and the request to be discharged granted.

A printed paper on Cholera, by Dr. Knapp, of Cincinnati, was presented, but as it had been already published, it was not deemed expedient to occupy the time of the Association by having it read.

Dr. J. L. Atlee, of Pennsylvania, stated that the Academy of Fine Arts had offered to take charge of the stone for the Washington Monument, and offered a resolution that a vote of thanks be tendered to the Managers of the Academy of Fine Arts, for their liberal offer to take charge of the stone for the Washington monument, until its delivery at Washington, which was adopted.

Dr. Charles Hooker, of Connecticut, offered the following amendment to the Constitution, which, under the rules, lay over until the next annual meeting of the Association.

"Any permanent member who shall not pay for the published *Transactions* for three successive years, shall be considered as withdrawn."

Dr. N. S. Davis, of Chicago, Illinois, submitted the following preamble and resolutions:—

Whereas, The present mode of conducting the annual meetings of the Association affords but little opportunity for the discussion of truly scientific questions and papers, and

Whereas, This has been regarded as a serious defect in the operation of our organization, impairing its scientific character, therefore

Resolved, That the daily sessions of the Association, during each annual meeting, be divided into two parts—the first to terminate at an hour not later than 12½ o'clock P. M., each day, and to be devoted as heretofore, to the general business of the Association—the second, consisting of all the time which it is deemed advisable to remain in session each day, after 12½ o'clock, P. M., to take the character of a scientific session, and to be devoted exclusively to the discussion of questions relating to the science and art of medicine.

Resolved, That the Association, in its capacity of a scientific session, having no power to act on any subject except of a scientific character, may continue in session, whenever thought advisable, a longer period than in its more general capacity.

Resolved, That the foregoing preamble and resolutions be referred to the Committee of Arrangements, with instructions to report on the same at the commencement of the next annual session.

Dr. C. G. Comegys, of Ohio, offered the following preamble and resolutions, which were, on motion, referred to the Committee on Nominations.

Whereas, The American Medical Association, though devoting itself ardently to the interest of medical science, is unable to accomplish all

its aims for the promotion of the usefulness of the profession in society without the aid of legislation, therefore

Resolved, That the members of the medical profession throughout the Union be urgently requested to take immediate and concerted action for petitioning their several legislative bodies to establish offices for the collection of vital statistics.

Resolved, That for the purpose of securing an ample number of petitioners for this object, this Association suggests that every member of the profession shall endeavor to secure the names of his personal friends.

Resolved, That a copy of the above resolutions be transmitted at once to the several State societies.

Dr. A. J. Semmes, of Washington, D. C., offered the following, which was adopted:—

Resolved, That a committee of three be appointed to report to the Association, at its next annual meeting, what measures should be adopted to remedy the evils existing in the present methods of holding coroner's inquests, by incompetent persons, by which the lives and liberties of the innocent may be jeopardized, and the ends of justice frustrated.

The President appointed Dr. A. J. Semmes, of Washington; Grafton Tyler, D. C.; and Dr. D. F. Condie, of Pennsylvania, that committee.

Dr. F. C. Stewart, of New York city, offered the following resolutions, which were unanimously adopted:—

Resolved, That the thanks of the American Medical Association be, and they are hereby tendered to the Committee of Arrangements for the liberal and cordial reception extended to its members during the present session.

Resolved, That a similar acknowledgment is eminently due, and also unanimously extended, to the officers, trustees, and managers of the several public and private institutions of the city and vicinity, which have been thrown open to the inspection of the members of the Association, the visitation of which has been a source of mingled satisfaction, and the management of which manifests the faithful and zealous care of those to whose guardianship they have been entrusted.

Dr. Biddle, Chairman of the Committee on Nominations, to whom was referred the resolution of Dr. Jewett, "that a committee of one from each State be appointed by this Association to report upon a uniform system of Registration of Marriages, Births, and Deaths," made a report, recommending the adoption of the resolution, and present the following list of names to constitute said committee:—

Drs. R. W. Wilson, of Hartford, Conn., Chairman; G. S. Palmer, of Gardiner, Me.; Silas Cumming, Fitz-William, N. H.; G. T. Elliot, Woodstock, Vt.; Edward Jarvis, Dorchester, Mass.; Joseph Mauran, Providence, R. I.; Jno. H. Griscom, New York, N. Y.; Henry Carpenter, Lancaster, Pa.; O. H. Taylor, Camden, N. J.; Lewis P. Bush, Wilmington Del.; A. Snowden Piggott, Baltimore, Md.; David H. Tucker, Richmond, Va.; — Pitman, Tarboro, N. C.; Harry Lindsley, Washington, D. C.; Jno. D. Dawson, Charleston, S. C.; R. D. Arnold, Sa-

vannah, Ga.; A. Lopez, Mobile, Alabama; J. Jones, New Orleans, La.; R. C. Foster, Nashville, Tenn.; C. J. Blackburne, Covington, Ky.; Jno. Dawson, Columbus, Ohio; Edmund Murphy, New Harmony, Indiana; A. D. Stebbins, Detroit, Mich.; J. B. Z. Blaney, Chicago, Ill.; Geo. D. Wilbur, Mineral Point, Wis.; Wm. M. McPheeters, St. Louis, Mo.; J. D. Elbert, Keosaqua, Iowa; Jno. H. Murphy, Falls of St. Anthony, Minnesota.

Mississippi and Arkansas were left blank.

Dr. J. L. Atlee, of Pennsylvania, offered the following resolutions, which were adopted :

Resolved, That to secure efficient teaching in medical schools, where the prime object is to enforce practical precepts, a large degree of union and harmony must exist among the teachers, and confidence be reposed in them by their pupils.

Resolved, That any such unnatural union as the mingling of an exclusive system, such as homœopathy, with scientific medicine, in a school, setting aside all questions of its untruthfulness, cannot fail, by the destruction of union and confidence and the production of confusion and disorder, unsettling and distracting the mind of the learners, to so far impair the usefulness of teaching as to render every school adopting such a policy unworthy the support of the profession.

Dr. Foster, of Tennessee, offered the following resolution, which, on motion, was laid on the table :

Resolved, That the State Medical Societies be requested to hold their annual meetings just one month before the meeting of the American Medical Association.

Dr. Clendennin, of Cincinnati, Ohio, offered the following :—

Resolved, That no State or local society shall hereafter be entitled to representation in this Association that has not adopted its code of ethics.

Resolved, That no State or local society that has intentionally violated or disregarded any article or clause in the code of ethics, shall longer be entitled to representation in this body.

This brought up before the Association the case of the Ohio State Medical Society, which, at its late annual meeting, on motion of Dr. Grant, “*Resolved*, That it is not derogatory to medical dignity, or inconsistent with medical honor, for medical gentlemen to take out a patent right for surgical or medical instruments.” That resolution is in direct opposition to § 4 of Art. I. Chap. II. of the Code of Ethics, which says: “Equally derogatory to professional character is it, for a physician to hold a patent for any surgical instrument,” &c.

A member from Ohio, Dr. Hills, defended the State Medical Society, deprecating any action upon the subject. He said that the obnoxious resolution had been carried by a very small majority; that the Society, as a body, accepted in full the Code of Ethics of the Medical Association, and could *only* have meant by its resolution an *erroneous interpretation* of the code, and not an opposition to its requirements.

Dr. Lemoine, of St. Louis, stated that a resolution on this subject had been made at St. Louis.

Dr. Lajus detailed, that at the St. Louis meeting, "Dr. J. E. Nagle, of Kenton, Ohio, proposed that the words, 'for any surgical Instrument,' in Chap. II., Art. I., § 4, of the Code of Ethics be erased. The proposition was not adopted." (Vide Transactions.) Dr. Lajus remarked, that the sense of the Association on this subject had been thus fairly and fully obtained, and that too by a member from *Ohio*; that the State Medical Society, by its resolution, had therefore, not only violated the code of ethics, but had also acted in opposition to the special action of the Association at its meeting in St. Louis, in confirmation of a section of that code.

Dr. Cock, of New York, made some eloquent remarks on the value of the code of ethics, and the importance of the Association upholding it as its safeguard, allowing no dereliction of its laws to pass unnoticed.

Several members advocated the removal *at once* from the erring Society of the right of representation.

Dr. Miltenberger, of Maryland, offered the following preamble and resolutions, to be appended to the resolutions of Dr. Clendennin:—

Whereas, It has been brought to the notice of the American Medical Association that the State Medical Society of Ohio violated, at their last meeting, one of the articles of its Code of Ethics. Therefore,

Resolved, That the Secretary of this Association be directed to inform the officers of that Society, that unless such action be rescinded, they cannot hereafter be represented in this Association.

Dr. J. L. Atlee, of Pennsylvania, offered an amendment to the foregoing preamble, the addition thereto of the particular obnoxious action alluded to, viz: the adoption of a resolution, "That it is not derogatory to medical dignity, or inconsistent with medical honor, for medical gentlemen to take out a patent right for surgical or medical instruments."

The amendment was accepted by Dr. Miltenberger, and the resolutions of Dr. Clendennin, with the preamble and resolutions of Dr. Miltenberger, and as amended by Dr. Atlee, were adopted. The resolutions as adopted are as follows:—

Resolved, That no State or local society shall be hereafter entitled to a representation in this Association, that has not adopted the code of ethics.

Resolved, That no State or local society that has violated or discarded any article or clause in the Code of Ethics, shall longer be entitled to a representation in this body.

Whereas, It has been brought to the notice of the American Medical Association that the State Medical Society of Ohio violated, at their last annual meeting, one of the articles of its Code of Ethics by adopting a resolution, "That it is not derogatory to medical dignity or inconsistent with medical honor for medical gentlemen to take out a patent right for surgical or medical instruments," therefore,

Resolved, That the Secretary of this Association be directed to inform the officers of that society, that, unless such action be rescinded, they cannot hereafter be represented in this Association.

Dr. A. Stillé, of Pennsylvania, offered the following resolutions, which were adopted:—

Resolved, That a special committee of five be appointed to report at the next meeting of the Association upon the following question:—

Might not the present system of repeating the same lectures to the same classes during two successive terms be usefully modified by extending the lectures of each chair over two sessions, so as to embrace a systematic and complete discussion of each of the following subjects:—

1. Special, Regional, and General Anatomy, including illustrative references to Morbid Anatomy.
2. Inorganic, Organic, and Pharmaceutical Chemistry and Toxicology.
3. General and Human Physiology, Hygiene, and Medical Jurisprudence.
4. Medical Botany, *Materia Medica*, Therapeutics.
5. General Pathology, Morbid Anatomy (systematic), Practice of Medicine.
6. General Surgical Pathology, or Institutes of Surgery, Mechanical Operative and Medicinal Surgery.
7. Obstetrics, Diseases of Women, Diseases of Children.
8. Hospital Clinical Medicine and Surgery.

Resolved, That the committee, at an early day, address the several medical colleges in regard to the proposed plan of instruction, requesting from them an official expression of opinion upon its merits and feasibility.

On motion of Dr. Pitcher, it was

Resolved, That the committee under the above resolution be appointed by the President, and that he be allowed to do this after the final adjournment of the Association.

The President appointed the following committee under the preceding resolutions:—

Dr. Alfred Stillé, of Philadelphia, chairman; Professor Samuel Jackson, of Philadelphia; Dr. John Bell, of Philadelphia; Dr. John Watson, of New York; and Dr. J. L. Cabell, of Charlottesville, Virginia.

Dr. Levi D. Scheets, of Ohio, offered the following alterations to the Constitution, which, under the rule, lay over until the next meeting:—

Whereas, It has been found necessary to devise some means of elevating the standard of education, both professional and general, among medical men, by those who are best acquainted with the sad and lamentable deficiency which prevails in this respect among a large mass of the profession, and particularly in the Western States. And,

Whereas, Efforts to this effect at home, have been opposed on the ground that more was exacted by such as took an active part in the matter, than is required by the "American Medical Association." And,

Whereas, It is believed that the national Society can exert a beneficial influence over the whole country. Therefore,

Resolved, That the Constitution of the Association be so amended as to require all delegates, before being allowed a seat in said Association, to satisfy the proper authorities that the societies which they represent,

require *graduation* as the *sine quâ non* to membership therein, and that no person can become a permanent member, a member by invitation, or can be received as a delegate from any other body, unless he be a graduate of some respectable medical school.

Resolved, That the editors of the various medical journals of the United States be requested to publish the foregoing, so that an interest may be awakened on this subject, and that societies may be prepared to comply with the above requisitions in case they meet the approval of this Association.

Dr. Corson, of New York, asked and obtained leave to read a brief abstract of a paper "On the Influence of Lead on the Heart's Action, and the Importance of the Study of the Cardiac Impulse in Disease, generally founded on a Series of Observations."

On motion, it was referred to a special committee of three, with instructions, if they approve of it, to transmit it to the Committee of Publication for insertion in the Transactions.

Drs. Charles D. Davis, Isaac Wood, and F. Campbell Stewart were appointed the committee.

Dr. Thomas, of Baltimore, read a paper on a simple and easy method of applying nitrate of silver to the air-passages, contrived and employed by the author's brother, Dr. John Chew Thomas, about six years since. It consists in applying a stick of caustic lightly to a fine grindstone or emory wheel made to revolve with great velocity. The caustic is thus thrown off in an impalpable powder, which may be inhaled by the patient sitting before the stone.

On motion of Dr. Emerson, the paper was referred to a committee of three, with instructions, if they deem it worthy of insertion in the Transactions, to transmit it to the Committee of Publication.

Drs. Emerson, of Philadelphia, Miltenberger, of Maryland, and R. P. Thomas, of Philadelphia were appointed the committee.

Dr. Atlee offered the following resolution, which was adopted:—

Resolved, That the subject of the contagiousness or non-contagiousness of cholera be especially recommended to the attention of the State Committee on Epidemics, State Topography, &c.

The proposition offered at the last annual meeting by Dr. S. D. Gross, of Kentucky, to amend that part of the Constitution which relates to the election of officers, so that the election shall take place immediately before the adjournment of each meeting, instead of immediately after its commencement, was called up, and, on motion, indefinitely postponed.

The proposition offered at the last annual meeting by Dr. F. A. Ramsey, of Tennessee, that the constitution be so amended as to dispense with the Nominating Committee, and the duties of such committee, was, on motion, rejected.

Dr. N. B. Ives, of Connecticut, proposed the following amendment to the Constitution, to be appended to the end of the second article:—

"The Association shall, at all times, have power to punish any of its members by reprimands, suspension, or expulsion, upon a three-fourths vote of the members present at any meeting, at which not less than one hundred are in attendance."

Dr. Dorset, of Virginia, offered the following amendments to the Constitution:—

Resolved, That with a view of adding dignity and influence to our body, and conveying a more adequate idea of its national representative character, the title "National Medical Congress" be substituted for that of "American Medical Association," and that we hold our sessions at least once in three years in Washington, D. C.

Dr. A. M. Pollock offered the following resolution:—

Resolved, That no organization or institution, entitled to representation in this Association, shall be considered in good standing which has not adopted its code of ethics.

Dr. Lemoine, of Missouri, called up the amendment to the Constitution offered last year by Dr. Byford, to change the name of the "Committee on Epidemics" to "Committees on Prevailing Diseases."

On motion, the proposed amendment was rejected.

Dr. Hays stated that the Mayor of the city, at the suggestion of some citizens who were anxious that the account of the reception at Independence Hall should be preserved in a more durable form and better fitted for distribution than in a newspaper report, had determined to publish it in a neat pamphlet, which would be ready for distribution to members of the Association to-morrow morning. Whereupon it was

Resolved, That the thanks of the Association be transmitted to the Mayor for this courtesy.

There being no further business, the Association, on motion, adjourned *sine die*.

THE MEDICAL EXAMINER.

PHILADELPHIA, JUNE, 1855.

AMERICAN MEDICAL ASSOCIATION.

Our readers will find an account of the proceedings of the last session of the American Medical Association in the present number. It will be seen that we have omitted the names of all the special committees from whom no reports were received, as well as the names of those appointed to report at the next session. We have also been unable to give the eloquent address of Mayor Conrad at Independence Hall. We regret the latter circumstance the less, however, as, besides a resolution passed by the Association to publish the address in the next volume of the Transactions, it has been very largely distributed to the profession in pamphlet form, by means of the Committee of Arrangements. With these exceptions, we believe that our account of the proceedings will be found to be a very full and accurate one.

Unanimity and good feeling prevailed throughout the session.—Not a single contre-temps occurred to mar the general harmony of the proceedings—all things went smoothly as a marriage bell. The only subject to be regretted was the rather singular circumstance that the three most important committees of the Association—the Committee on Plans of Organization for State and County Societies, the Committee on Medical Literature, and the Committee on Medical Education, all of which were anxiously looked for—gave in no reports. We sincerely trust that we may never hereafter have to record a similar omission.

We cannot refrain from copying the following very courteous and flattering remarks from the graceful and ready pen (we presume) of Dr. Morland, one of the editors of the Boston Medical and Surgical Journal. We feel very sure that our readers will be much gratified by a perusal of them.

The American Medical Association.—The session of this body, which has just closed, while it was characterized by the most unbroken harmony in all its proceedings, and by the great value and importance of the scientific communications made, was also, we will venture to affirm, unsurpassed by any yet helden, in the number and variety of the objects of interest exhibited to the members of the Association, and in the generous hospitality shown them during the whole of their stay in the beautiful city of Philadelphia.

We have already alluded, in a somewhat desultory manner, to the business proceedings of the session—and gratefully remembering the numerous attentions shown, and the hearty welcome everywhere extended, we wish to put a few recollections upon record. To the “Committee of Arrangement” the thanks of the Association are eminently due, for the complete and efficient discharge of their multiform and onerous duties. So quietly and smoothly did everything move on, that while we were well aware how much time and attention this management must have required, we daily admired the tact and good judgment which so unostentatiously, yet so thoroughly, directed the whole. Dr. Hays, the Chairman of the Committee, was certainly never *more* successful in any of his undertakings, and this, as every one will allow, while it is saying a great deal, expresses not one whit too much. We would particularly notice the great utility of the handsomely-prepared volume, a copy of which was presented to each member of the Association who duly registered his name. This little book contains the names of the Officers of the Association; of the Committees who were to report; the “code of ethics” of the Association; short accounts of places of interest to be visited; a map of Philadelphia, &c. &c. A publication of this sort is almost indispensable at such a time.

The delegations from the several States (twenty-six States being represented), were very full; five hundred and twenty-three, we believe, is the entire number of registered names. The members who so inclined were conveyed in commodious coaches, sixteen in number, to visit Girard College and Fairmount Water Works. At the College they were kindly received by President Allen, who conducted them over the magnificent and completely appointed building—the boys, in two or three of the school-rooms, being kept sitting for a while, that the visitors might pass through and inspect them. Every one must have been impressed by their neat, orderly and contented appearance. Great credit is due to the managers of this Institution and to its officers generally. Not the least pleasant part of this visit was the ascent of the members, *en masse*, to the roof

of the building, whence a most imposing and extensive view of the city and its environs is obtained. The solidity of the building, and its faithful and costly construction, are worthy of special note. It is well known that the *roof*, even, is of stone, and of immense strength and weight. We remarked but one individual who hesitated to ascend, and he, indeed, retired, seemingly apprehensive that the additional weight of the visitors might be too much for the supports of the roof! We are happy to state that the latter did *not* fall in! The medical wisdom of the land escaped entombment beneath *that* marble!

Several other excursions were made, with universal satisfaction;—to the Philadelphia Hospital, an immense establishment, comprising within its walls a lunatic hospital, admirably managed; paupers are the chief inmates of this institution; the area covered by it, is, we were told by the gentlemanly and efficient resident physician, Dr. Campbell, *sixteen acres*. The amount of labor done by Dr. C. and his assistants must be very large, and, so far as we could observe, nothing was neglected.

The reception of the Association in Independence Hall was exceedingly gratifying. To visit this famous spot, in itself alone, is no slight privilege; to be eloquently greeted, and made to feel "*at home*" in it, is much more. We are happy to know that the beautiful Address of his Honor, Mayor Conrad, is already printed, in conjunction with the appropriate presentation speech of Dr. Hays, and that they both will be incorporated in the next volume of "*Transactions*."

We refer with great pleasure to the various elegant and delightful entertainments offered to the Association, by several of the physicians of Philadelphia, some of whose houses were thrown open every evening, and a hearty welcome given to all the invited guests. When the numbers of the Association are remembered, the extent of this noble hospitality may be, in some degree, estimated. Not only was the outer man most sumptuously provided for, but the lovers of the fine arts and of scientific rarities were gratified to the full. The very valuable conservatory of Dr. George B. Wood, President of the Association, was lighted for the inspection of visitors, with the gardener in attendance. This rare collection is chiefly composed of medicinal plants, and was gathered, as we learn, by its owner, for the purpose of illustrating his lectures. Drs. Wood, Bache, Hodge, Jackson, Pancoast, Norris, Paul, Alfred Stillé and Hartshorne, sent cards of invitation to the members of the Association, who gladly accepted, and seemed to have attained the *ne plus ultra* of enjoyment at each of their entertainers' houses. For ourselves, we are heartily glad that no public entertainment was given to the assembled guests, for, aside from the enormous and unjustifiable expense incurred, and which, of itself, would finally defeat the objects, and virtually annul the meetings, of the Association, it would be disgraceful to have a renewal of certain scenes that have transpired. We hope, therefore, that the example of our Philadelphia brethren will be followed hereafter. A more generous, elegant and *appropriate* hospitality we have never witnessed.

The Association may consider itself highly complimented by the cordial reception given them by Mr. Lea, of Philadelphia. Having an ample fortune at his command, he has indulged an exquisite taste, by the accumulation of a large number of exceedingly valuable paintings and other works of art, and these are admirably arranged in his really magnificent mansion. We can say with truth, that it is worth a journey to Philadelphia merely to see these treasures. When, in addition, all that a courteous gentleman could devise, to please his visitors, is done, we cannot too gratefully express our acknowledgments. Mr. Lea was assisted in doing the honors of his house, by his son (of the well-known firm of Blanchard & Lea), to whom our thanks are especially due, for very pleasant attentions. Upon so agreeable a theme, we might fill a far larger space than we can command. Many gentlemen (ourselves among the number), can testify to the polite invitations to private tables and to the delightful intercourse of family circles. Under such *treatment* we prognosticate a decided proclivity on the part of all present, to fall into the same way again! And we make no doubt that our friends of the far North-West, will, next year, welcome the Association in the

warmest manner and with the happiest anticipations. We can testify to the very decided wish (we might almost term it *will*), that Detroit, Michigan should be the next place of meeting—and which was finally so settled. Nashville, Tenn., contested the matter bravely. This eagerness upon the point, clearly shows that the profession throughout the land feel the beneficial influence of the "American Medical Association."

During the latter half of the session, Dr. Storer, of this city, circulated among the members copies of the following stanzas, sent to him by Dr. O. W. Holmes, in expectation of a public entertainment being given. Having by no means been so generally seen as their beauty and appropriateness deserve, we give them, in this pleasant connection, by permission of their author:

A TRIPLE health to Friendship, Science, Art,
From heads and hands that own a common heart!
Each in its turn the others' willing slave;
Each in its season strong to heal and save.

Friendship's blind service, in the hour of need,
Wipes the pale face—and lets the victim bleed.
Science must stop to reason and explain;
ART claps his finger on the streaming vein.

But Art's brief memory fails the hand at last;
Then SCIENCE lifts the flambeau of the past.
When both their equal impotence deplore—
When Learning sighs, and Skill can do no more,
The tear of FRIENDSHIP pours its heavenly balm,
And soothes the pang no anodyne may calm!

May 1, 1855.

And thus, under the most favorable auspices, without and within, closed this, the eighth annual meeting—nothing wanting, not even the touch of poesy, to complete and preserve its agreeable reminiscences.

The readers of the Examiner may remember that we published in the April number a review of Dr. Eben. Watson's work "On the Topical Medication of the Larynx," &c., in connection with a paper by Horace Green, M.D., "On the Employment of Injections into the Bronchial Tubes and into Tubercular Cavities of the Lungs." A few days after the issue of the journal, we received a note from Dr. Green, asking us, on the ground of injustice to himself and to medical science, to allow him room in the next number to correct in a brief article certain mis-statements made in the review. We answered him immediately that he was at liberty to correct any mis-statements of facts that might have been made, and in the manner he proposed, viz., in a short article. It may be proper here to observe, that this always has been our rule. We claim, however, to be the judge whether the allegations are mis-statements or are not, and for the proper exercise of such judgment hold ourselves responsible. On the other hand, when an article is signed, we do not consider ourselves accountable for anything either said or implied in it. To its author alone belong the right and responsibility of correcting any mis-statements in it, and that right no editor can properly refuse him. On the 14th of April

we received a lengthy paper from Dr. Green, with a note accompanying it, thanking us for our compliance with his request. After a careful perusal of the paper, we returned it to Dr. Green, stating our reasons for so doing in the letter which will be found below. A large portion of the paper was entirely irrelevant. The introduction into it of Dr. Ware's favorable opinions of Dr. Green's practice, in connection with a review written years ago in the *American Journal of Medical Sciences*, and the account of the *unde derivatur* of Dr. Watson's topical treatment of hooping cough and other diseases, though, no doubt, exceedingly interesting, were matters which had nothing whatever to do with the correction of mis-statements asked of us. With every disposition, therefore, to make allowance for Dr. Green's desire to vindicate himself from what he considered misrepresentations, we thought the reasons just mentioned, with those given in our letter to him, were such as obliged us to decline his paper. To have published it, would have been a withdrawal of what we were satisfied was correct and not unjust. It afterwards appeared in the May number of the *American Medical Monthly*, a journal of which Dr. Green is a co-editor, under the heading of "The Examiner corrected." In an editorial in the same journal are the following remarks: "The other answer explains itself. It was offered to the *Examiner*, in which the review appeared, but was rejected, for reasons which appear to us quibbles. The editor or the reviewer has shown himself a little thin-skinned, as the saying is, in not being willing to allow his readers to hear the other side. However, that is none of our concern, and we merely mention it as a passing reflection. Meantime, we must do what we can to perform the duty which properly devolved upon the *Examiner*."

Our readers can judge for themselves, after reading the following, whether the term "quibble," as applied to our refusal, was either just or courteous.

Philadelphia, April 17th, 1855.

HORACE GREEN, M.D.

Sir,—In answer to my letter to you of the 6th inst., in which it was stated that I would cheerfully allow you an opportunity of correcting, in the manner you desired, (in a brief article,) any mis-statements of facts made in a review contained in the April number of the *Examiner*, I received yesterday a note from you accompanying a manuscript of twelve pages. After carefully reading it over, and comparing it with the review and Dr. Watson's work, I have come to the conclusion to decline its publication. This I do, from having fully satisfied myself that, with one exception, the matters complained of are *not* mis-statements. The exception I refer to, which I shall take the earliest opportunity to correct, relates to the passage, (p. 205 of the *Examiner*) in which the reviewer speaks of a sponge "dropped into the windpipe of a man, whose larynx Dr. Peaslee was cauterizing." This mis-statement, which I believe, which I may say I know, from the character of the gentlemen who wrote the article in question, to have

been unintentional, is the only one, which, after a most careful examination, I have been able to discover. As I, however, wish to show, from courtesy to you, on what grounds I make this statement, I will briefly go over the various points to which you have addressed your letter, premising that the Reviewer's statements and not his opinions, are the matters in issue between us.

The first mis-statement you complain of, is the remark that a "sponge, which, according to Dr. Green, dropped into the wind-pipe," &c. (p. 205 Examiner.) This assertion was an incorrect one, it is true. It is plain, however, from the context, that the Reviewer's object was not to condemn Dr. Peaslee for letting a sponge drop into the larynx—such an idea never entered into his mind—but was to show his readers what was the opinion of Dr. Watson of the size of the sponge extracted. Other journals and foreign ones have quoted, I may observe, this same passage.

On page three of your manuscript, you say, after giving an account of the same sponge case, "Now it is the above statement, &c., that your Reviewer, along with Dr. Watson, would characterise as being 'grossly inaccurate.'" It is a sufficient answer to this, to say that the Reviewer used no such language. He expresses no opinion of his own upon the subject. The only statement made is in Dr. Watson's own words, (p. 20, English edition.) In the original from which it is taken, it is followed by remarks, I perceive, far more severe than any copied into the review. Dr. Watson says, "when once the mind of the reader has been impressed with the gross inaccuracy of observation, or the still more inexcusable laxity of description which characterizes the statements above quoted, it is in vain to attempt pointing out the grain of wheat in the bushel of chaff, &c." I cannot conceive that the Reviewer is bound to defend these opinions of Dr. Watson. It should suffice, that he gave what he did copy, truly.

As regards your strictures upon the statement of the Reviewer, that Dr. Watson is "altogether opposed to its employment, (speaking of the use of caustic in croup,) unless before any exudation has been poured out, which is equivalent to saying, before there is any croup to treat," you, yourself, admit that Dr. Watson *does* object to its use during the stage of exudation. (See p. 53, Watson.) He does not do this, however, for theoretical reasons alone, as you state, but from positive experience in its use. He narrates two cases, and remarks (p. 46) that he "could relate several others, the subjects of which were children," to prove that the topical treatment is unsuitable during the acute stage, and that it retards, if it does not prevent its favorable progress. As to the treatment of the disease *after* the exudation is cast off, Dr. W. does, as you say, consider "the renewal of the topical treatment as one of the appropriate measures to be employed," "but it is only after *blistering, gentle purgatives, with tonics, a nourishing diet, and as soon as the effects of the calomel permit,*" that he mentions it.

In my opinion, the Reviewer had a perfect right to use the words, "which is equivalent to saying before there is any croup to treat." Every one is satisfied, when the membrane has been seen, that a pre-exudative stage must have existed. It is a very different matter, though, to determine from symptoms, that such will be the termination of the disease. We may suspect that such will be the issue, and may imagine, if we please, that our treatment has been successful in preventing it. When we see, and only when we see, the membrane, can we be sure, at least such is my opinion, that we are treating a case of that terrible affection.

All that portion of your manuscript which relates to Dr. Ware and his opinions, is entirely irrelevant to the matter at issue.

As regards the Reviewer's remark, when upon "follicular disease of the larynx," that Dr. Watson is disposed to regard it altogether as what Carlyle would call "a sham." I must refer you, for its defence, to pages 66 and 67 of Dr. Watson's work. I shall make but one extract. The author remarks, "The latter (follicular disease) must, indeed, be an affection of very rare occurrence, since so few writers take notice of it, and I feel almost inclined to question the reality of its existence as a disease of the larynx in any case. At all events, I do not hesitate to assert, that we have no evidence, in even Dr. Green's writings, which is worthy to be considered as establishing the matter; and I will also maintain that the assump-

tion of the existence of such a lesion as the cause of certain symptoms, is neither necessary nor philosophical." This statement clearly shows that Dr. Watson not only doubts, as you allow he does, the *extent* of the disease, but also "the reality of its existence."

Finally, as respects the remarks of the Reviewer upon "cauterization in hooping-cough," as he no where denies that Dr. Watson owes his first trial of it, in that affection, to a perusal of your work on "Diseases of the Air Passages," you, surely, have no right to blame him for what he has left unsaid.

These are all the points I believe, in issue between us. Your manuscript, however, is so largely taken up with other subjects, entirely irrelevant to the question, that I should be obliged to decline it for such reason alone, were there **none others.**

In justification of the necessity of a review, I would state that your position as an author, a professor, a physician in large practice, and a co-editor of an extensively read journal, demanded a thorough examination of the novel procedure brought by you before the profession in your article "On the Employment of Injections into the Bronchial tubes and into tubercular Cavities of the Lungs." I was in hopes, after reading it, that it would be properly noticed in some of our journals. As it was not done, however, and as I conscientiously thought that your advised proceeding must be both hazardous at the time it is employed, and liable to be followed by dangerous consequences, I requested a review of it, and can only express my sincere regret that the opinions therein expressed were not more acceptable to you, since no personal feelings were in any way engaged in the discussion.

I remain, very respectfully,
S. L. HOLLINGSWORTH.

We copy the following remarks from the Charleston Medical Journal, as the person to whom they refer is now in our city.

DR. ALEX. TURNBULL.—In answer to numerous inquiries which have been made concerning the scientific attainments of Dr. Turnbull; and, also, to correct the erroneous impressions which have gone abroad through the medium of the public prints, we undertake an exposition of his career; in doing which, we are deviating from our accustomed course, and giving undeserved importance to one who would not otherwise have occupied our attention. The unblushing assumptions of this person to perform impossibilities, and the rumours of his pretended cures, have so impressed the minds of the credulous, that it becomes our duty to warn our readers, who may have friends or patients laboring under diseases of the eye or ear, from crediting the recommendatory advertisements which have been in circulation, respecting his "simple and painless processes," by which diseases hitherto beyond the resources of art are speedily and permanently cured.

Many an anxious parent has been subjected, on the faith of these advertisements, to serious inconvenience and considerable expense, in the anticipation that soon their deaf-mute children would be restored to the healthful use of their dormant faculties. From day to day they were encouraged to hope, until, wearied by a longer attendance, or being assured that time alone was required to perfect a cure, they have departed in trembling anxiety, too soon to have the unwelcome truth forced upon them, that the objects of their solicitude were as hopelessly incurable as ever.

Some time since, Dr. Turnbull came to this country, and soon rumours reached us of his curing all manner of *deafness and blindness*; in due time Dr. T. reached our city, and took rooms at one of our hotels, where he announced himself as being prepared to treat the diseases of the eye and ear. For a time, he attracted very little attention; but, after treating divers cases, two were announced in a respectable city paper, (Charleston Courier,) as having been cured by his peculiar processes.

"One, a boy from Georgia, now nine years old, who had lost his hearing from fever in his third year," and been since that time completely deaf, "has been restored to an unusual degree of delicacy and sensitiveness, and he is making incredibly rapid progress in distinct articulation." Now we know this to be the reverse of the fact. Both parents of this child have emphatically averred that his hearing is not in the slightest degree restored; and, on seeing the above advertisement, the father became indignant, and immediately telegraphed the Augusta papers not to copy it.

"The other case is a youth from this city, aged 18, whose infirmities (of hearing and speech) being in some sort hereditary, and of a most decided character, afforded a crucial test of Dr. Turnbull's processes. In this interesting case, also, the progress of improvement has been rapid and uninterrupted, and the patient is now hopefully undertaking the education which is necessary to give him the due use and appreciation of his new born senses."

This case is the only one, that we know, which has been benefited. But there is no miracle here. There was only an absence of secretion in the external meatus, and the sense of hearing was obtuse, and was rendered less so. The patient has been under treatment for several weeks, and is not yet discharged.

We are informed, in the same Journal, that Dr. T. has contributed *largely* to the leading Medical Journals of England, and that "his professional status has been recognized and approved by the most competent European authority, and the value of his discoveries and contributions, in medical resources and remedial agencies, has been cheerfully admitted and abundantly attested."

Before commenting on these statements we will sketch the history of the Doctor, and present the opinion of the profession in England concerning him.

In 1835, there appeared, in London, a duodecimo of 171 pages, "On the Medical Properties of the Natural Order Ranunculaceæ and their Alkaloids, *Veratria, Aconitine, Delphinia and Sabadilline*." By A. TURNBULL, M.D.

The reviewer of this work, in the "British and Foreign Medical Review," says that "if one quarter of what it contains be true, (and surely that would not be an unreasonable requisition,) Dr. Turnbull's alkaloids are sufficient to change the face, not only of medicine, but of society."*

"Of nine cases of affections of the heart, veratria is said to have cured

*The latter remark having reference to the moral effects which would ensue from the prolongation of human life, and the eradication of a large class of incurable diseases.

or relieved all ; of thirteen cases of neuralgia, to have cured twelve ; of nine cases of rheumatism, to have cured eight, and almost the remaining one. The heart affections, moreover, were evidently cases of organic disease, though the author, with great humility, generally refrains from saying so. * * * * Every case of neuralgia was perfectly cured, except one, and even of that the history concludes, in the text, with the words 'leaving no trace of the affection behind, neither has any renewal of it taken place?' (p. 70.) The note, however, a traitor to the text, says—'In this instance the veratria has completely failed in giving permanent relief,' &c." (*B. and F. Med. Review*, vol. ii, p. 499.)

These alkaloids were given a fair trial by the profession of that day, but no such effects followed their use as had been attributed to them by Dr. Turnbull. Veratria and Aconitine have been extensively employed down to the present time, and, though they sometimes are found useful as topical applications in neuralgia, like other medicines of their class, they are, internally, still of doubtful efficacy.

A "Treatise on Painful and Nervous Affections, and on a New Mode of Treatment for Diseases of the Eye and Ear," by A. TURNBULL, M.D., appeared in 1837. The treatment of the affections of the latter organ, comprised in a few pages, consisted in the application of the alkaloid veratria to the external meatus and the adjoining parts. The "electro-stimulation," as the author styles it, having proved so efficacious in curing deafness, he determined to experiment upon the deaf and dumb, and soon cures were announced as having been effected by this means. The possessor of this remedy betook himself to Scotland to operate upon the deaf-mutes of that country, but he was not so successful as might have been expected ; still rumour said that he had cured several cases in the Deaf and Dumb Institutions of Edinburgh, and it was not until some time had elapsed, that Mr. ROBERT KINNIBURGH, the intelligent head master of that institution, publicly asserted that no cure had been effected.* His cures were also questioned, and his statements severely criticised in Chambers' Journal, for September, 1839 ; but, three years afterwards, we find the Edinburgh Journalist retracting his former strictures, and lauding the achievements reputed to have been performed by Dr. T. in his tour through Scotland.

The editor tells us, that wishing to arrive at a thorough conviction, he "studied the most recent and approved works on aural surgery, in order to ascertain in what respects Dr. Turnbull's practice differed from that which was general in the profession." Now it is impossible to understand, or appreciate the treatment of a class of diseases, until the anatomy, physiology and pathology of the organs involved, have been thoroughly studied. An unprofessional man cannot be convinced of his error, or justly estimate the merits of a cure, or the causes of failure.

Here is what this observer relates :

"Experiment in time showed that in cases of deafness arising from low nervous energy, a class to which nearly all the cases of the deaf-

*Vid. Wilde's, on Diseases of the Ear; Am. Ed., p. 55.

dumb belong, the organ may be more or less successfully treated by applying to it a weak alkaloid. This he rubs gently on the tympanum by means of an instrument tipped with chamois leather, and generally in ten minutes the effects are manifest.

"But the greater number of diseases of the ear, arise from cold, producing acute and chronic inflammation, and diminishing or altogether obstructing the flow of wax, whereby the tympanum and other parts of the outer ear, from being exposed to the air, are thickened, and so deprived of sensibility. Cold also produces inflammation and consequent accumulation of mucus in the passage called the Eustachian tube, which communicates between the internal ear and the back of the mouth. Finding cured persons relapse in consequence of the defect of wax, Dr. Turnbull was prompted to use his ingenuity in endeavoring to discover the means of sustaining that secretion. He reflected that the application of the mouth of the child to its mother's breast, by removing the pressure of the atmosphere, causes the milk immediately to flow, and he conceived that a similar result might follow with respect to the wax of the ear, if he could by any means remove the pressure of the atmosphere from the external parts. For this purpose he at first used a syringe with an India-rubber mouth, exactly fitted to the aperture of the ear. The plan was successful; the blood vessels resumed a free circulation, and the flow of wax recommenced. It strikes us that we have rarely known a more beautiful instance of a simple natural principle being taken advantage of by human ingenuity for a human end."

Had this writer profited by his studies, he would have known that there is no analogy between the mammary gland and the follicles of the meatus, or between their respective secretions. The flow of milk from the former, by the removal of atmospheric pressure, is in obedience to a physical law, while the secretion of the latter depends upon the normality of the secreting follicles, and is poured out independent of any atmospheric condition.

Again:—"The clearing of the Eustachian tube, for which no means formerly existed but the application of medicines to the bowels, (!) or the dangerous use of the catheter, was effected by Dr. Turnbull by the same simple means."

Here we have a veracious, but misguided man, stating his convictions, and imparting to the world the value of remedial agents, about which he really knows nothing; showing too clearly, by his laudation of Dr. T., that he was the dupe of that person. Catheterism of the Eustachian tube is now well known to be a safe and simple operation. From the time of its first performance by Guyot, to the present day, it has been so considered.* We have seen it performed scores of times by the surgeons of Great Britain and the Continent, and have never known any unpleasant consequences ensue. But we need not be surprised that the friends of Dr. T. should call it a *dangerous* operation; for the only two cases recorded of injury having resulted from this simple procedure, occurred to Dr. Turnbull himself, *two of his patients having fallen victims*

* Vid. Pilcher on the Ear. 1843. p. 258.

to it, and on both of whom coroner's inquests were held. One of these, aged 68, was, almost immediately after the operation, attacked with a violent swelling in the throat, of which he died on the tenth day; the other, aged 18, in the enjoyment of perfect health, *died whilst undergoing the operation.* Messrs. Liston, Quain and Savage, were present at the post mortem examination, and stated, as their opinion, that death was caused by the forcible injection of cold air into the tympanum."*

After this sad affair, Dr. Turnbull resorted to a more "simple means" of clearing the Eustachian tubes, as indicated above. This he does by means of an air pump, in connexion with a flexible tube, "introduced into the mouth of the patient, and applied to the orifice of the Eustachian passage. A communication is thus opened between the previously rarified air in the receiver and the orifice, from which a discharge of mucus is made to enter the tube, which is then withdrawn."

In 1841-'43, Dr. Turnbull is again heard of in new fields of discovery. The Literary Gazette, whose glaring advertisements, on a former occasion, attracted the attention of the Edinburgh Journalist, is again in the van; and we read of *cures of blindness by the fumes of Prussic acid.*

We will let the writer speak for himself:

"The various stages of cure, advanced in our presence, by the simple application, for about half a minute, or until a little warmth was felt by the patient, of the vapor of hydrocyanic acid in a small phial, held up to the eye, with an aperture fitting the form of that organ; the various nature of the diseases so assailed—opacities of the cornea, inflammation, cataract, amaurosis, iritis, &c., &c.; the various stages of relief which the patients had reached, with sometimes one eye opened to sight and pleasurable to look upon, and the other left nearly blind and in its pristine deformity, to show what had been achieved; the various appearances of films removing, cataracts breaking up and being gradually reabsorbed, pupils being re-developed, and other altogether extraordinary symptoms of remedy and regeneration, filled us, we repeat, with wonder and delight."

The editors of Chambers' Journal considered the name of the editor a sufficient guarantee for the accuracy of these statements, and at once began to sound Dr. T.'s praise abroad. Their puffs and notices, spread over many pages of their Journal, may be viewed as a popular report on Ophthalmic and Aural Surgery.

Dr. T., emboldened by such commendations, published a short letter in the Lancet, (Sept. 28th, 1841,) containing a few "hints on the effects of hydrocyanic acid upon the Eye." His pamphlet, a small octavo of eighty-nine pages, on the "*Treatment of the Diseases of the Eye, by means of Prussic Acid Vapor, and other Medicinal Agents,*" appeared two years later. Dr. Turnbull having had a little practice in authorship, now indulges in theory, and, in his own (original) way, attempts an explanation of the *modus operandi* of the medicaments he prescribes.

*Lancet, July 6th, 1839; also, London Times same date.

"It is a well known fact," he says, "that the eyes of those who have been destroyed by hydrocyanic acid, for a length of time after death show none of the usual symptoms of dimness; on the contrary, the eye is clear and the pupil much dilated. This satisfied me that the acid exerted a specific action upon the eye, which might be made available, as a medical agent, for relieving many of the diseases to which that organ is so subject"—(p. 4.)* The condition of the eyes, after death, of those who have died from the effects of Prussic acid, are well known to be as Dr. T. describes, but the inference drawn from the fact is preposterous and absurd: for, as those who die from the effects of carbonic acid, or those who expire in a fit of apoplexy, present the same appearance of the eyes, we may, by the same analogical mode of reasoning, infer that the fumes of charcoal, and slight congestion of the brain, are specific remedies for diseases of these organs.

The explanation of the therapeutic process is as follows:—"The plan I generally adopt is to put into an ounce phial a drachm of the acid, and hold it in close contact with the eye, the eyelid being open, for the space of about half a minute, or until such time as the patient feels a little warmth, or the person holding the phial sees the pupil greatly dilated and the vessels of the eye injected with blood, which is the invariable effect of the application of the acid. The patient is not sensible of pain from this peculiar state being induced, which appears to me to result from the powerfully sedative influence of the acid, thereby showing two opposite powers, to wit: stimulating and sedative, are exerted at the same time, and thereby the uneasiness, arising generally from a stimulant alone, is prevented. Its great power in removing those diseases chiefly arises from the two powers being so blended, and thus enabling the eye to bear a sufficient stimulating action without injury. *The person who holds the acid to the eye should be careful not to allow the patient to smell it.*"†

This is original indeed! Pain is avoided, while incipient inflammation ("the vessels being greatly injected") is produced, which cures cataract, iritis and amaurosis. Diseases essentially different, resulting from diverse causes, and thus cured by stimulation, carried further than could otherwise be done by the sedation, which is also an effect of the vapor! But why, we may inquire, is the bottle-holder warned to remove the phial, for fear of too great an impression being produced, if the two forces are antagonistic and of equal power? In accordance with the above theory, it may be suggested that the forces will all necessarily counteract each other, and no effect will be produced.

Dr. T. uses the essential oil of bitter almonds in the same diseases, feeling convinced, he says, that it is more soothing, relieving pain without dilating the pupils or causing much redness of the eye, and being useful, also, in taking away the heat occasioned by the hydrocyanic acid. We may ask, if this harmless remedy fulfils all the required indications, why use the most dangerous? and why, on the same page, assign the

* *Vid. Lancet, Oct. 9th, 1841.*

† *Vid. Lancet, as above.*

same reasons for preferring and rejecting each alternately? But the Doctor is not satisfied yet; he has discovered *newer* remedies, and must consequently apologize for their introduction, which he does by disparaging his former favorite.

One reason why he did not rest satisfied with the great effects produced by the Prussic acid was, that its action, like that of all other medicines, decreased in power by continued application, thereby rendering it necessary to have occasional recourse to other medicines, in order to ensure a more *speedy recovery*. Another reason was, the reluctance of many individuals to submit the eye to the action of so potent a medicine. Well might a prudent person object to allow the vapor of concentrated Prussic acid to be brought in contact with his eyes, when such authorities as Pereira and Christison state, that, if a drop of the pure acid be placed on the throat of a dog, or applied to the eye, death takes place in a few seconds; and that, inhaling the vapor, decidedly produces death more quickly than any other mode of using the acid.

The *newer remedies* are the *chlorocyanic* and the *sulphuretted chyazic acids*, the *chloruret of iodine*, and the *bisulphuret of carbon*. The first two articles are very different in their action from the Prussic acid, however, but we are to infer that they produce the same effects. The vapor of the *chloruret of iodine* irritates the eye, and the *bisulphuret of carbon* causes an intense prickling sensation, yet for reasons known only to Dr. T., they all cure "*blindness*."^{*}

The following is the ingenious explanation of the *modus operandi* of these substances when applied to the skin: "The action of these medicines, which contain so large a share of carbon, arises from the carbon in the vapor permeating the cuticle, and coming in contact with the oxygen in the vessels, which is conveyed through every part of the frame by inspiration and otherwise, thereby forming carbonic acid gas, which evolves heat in the ratio of the quantity consumed by the oxygen." On page 70 of his work last noticed, he says, "the rationale, in my opinion, is, that the large quantity of carbon in some of the essential oils, and its solubility in alcohol, permits it, by friction, to pass through the cuticle and unite with the oxygen."

The long received theory of the cure of amaurosis by stimulating the nerves of the skin, is then no longer tenable after the above lucid explanation.

We have seen that Dr. Turnbull's "simple means" for the cure of deafness, was sufficient to cause the death of two of his patients. But since he has resorted to the vapor of concentrated Prussic acid, as a local application to the delicate surface of the eye, we hear of nothing more serious than frequent failures, some of which necessitated the refunding of his fees.[†]

From our references, it has been seen in what repute Dr. Turnbull is held, and what has been considered the value of his medical contributions, by his own countrymen. We have not particularized the unpro-

* *Vid. Lancet, Oct. 29, 1842.*

† *Lancet, Jan. 7, 1843.*

fessional and disreputable acts of Dr. Turnbull, which we find recorded in the medical periodicals of his country; for so numerous have they been, that it would look like persecution to repeat them here; and our readers would have cause to complain of the wearisome length of the sketch we have drawn.

But before dismissing the subject, we must advert more particularly to some of the pretensions of Dr. Turnbull, and the results of his practice as it has come under our observation. He not only attempts to cure deaf-dumbness, but has endeavored to force conviction that such has actually been accomplished. Now, congenital deaf-dumbness has always been regarded as incurable, and we have no satisfactory proof that a single deaf-mute has ever been cured—that is to say, has so recovered the use of the organ of hearing as to be able, under all circumstances, to communicate with other persons in an unrestrained manner.*

But, when this condition has been produced by some mechanical impediment, or by some pathological state of the organ or derangement of its function, it may be removed. And if the disease has been of long standing, a cure may sometimes appear miraculous, indeed, to unprofessional persons.

There is more room for deception, in respect to the sense of hearing, than may be generally known. A deaf-mute can be taught to speak and answer questions addressed to him, without hearing a single note. Only two years since, when visiting the Institution for the Deaf and Dumb in Berlin, we had the opportunity of satisfying ourselves of this fact. By a judicious system of training, the inmates of this institution are not only taught to understand spoken language, by construing the movements of the lips of those who address them, but so to appreciate the movements of their own, by the muscular sense entirely, that they are enabled to articulate distinctly, and thus communicate with others in a satisfactory manner.

Instances may be adduced, where some of Dr. Turnbull's deaf patients actually asserted that they heard the ticking of a watch at a greater distance than persons in full possession of the sense of hearing could do. Without wishing to deceive, these persons, with their imaginations highly excited, could readily mistake the conception arising in their own minds for the sensation produced by an external agent. And those most interested in the success of the treatment, are not in a condition to detect the imposition, even were they able to apply the philosophic explanation of the phenomenon.

But it is only to the public, and not to the profession, that Dr. Turnbull makes these pretensions—implying that *he* can do what no other *mere* man can do. If the power of giving sight to the blind, hearing to the deaf, and speech to the dumb, was imparted to only ONE, who was more than man, then such power was miraculous, and cannot be arrogated by any erring mortal.

As intimated before, however, we doubt the efficacy of the means he employs, and, from our observation of the cases which have been sub-

* Kramer on Diseases of the Ear, Ed. 1838, p. 204.

jected to his treatment, we must regard him as decidedly less successful than other surgeons who make these diseases their especial study. There is already a reaction in the public mind in reference to his alleged cures. His patients are becoming weary, "with hope deferred," and many have left for their homes without having experienced the slightest amelioration of their infirmities.

MEDICAL NEWS.

The vacancy in the Chair of Surgery of the University of Pennsylvania, caused by the resignation of Prof. Gibson, has been filled by the election of Dr. Henry H. Smith, of Philadelphia.

Dr. Smith graduated in the department of Arts of the University of Pennsylvania, in the year 1834, and in the Medical Department of the same University in the year 1837. After being resident physician in the Pennsylvania Hospital for two years, Dr. S. went to Europe, where he spent 18 months. Upon his return, he lectured for several years in the Philadelphia Medical Institute. He was appointed Assistant Lecturer on Demonstrative Surgery in the University of Pennsylvania in the year 1845, and Consulting Surgeon to St. John's Hospital in 1849. In the year 1854 he was elected Consulting Surgeon and Lecturer on Clinical Surgery in the Philadelphia Hospital, Blockley.

In 1840, Dr. Smith translated Civiale on Stone and Gravel. In 1843, he published a work on Minor Surgery, which has since passed through three editions; and in 1844, an Anatomical Atlas. Edited the United States Dissector in 1846; and, in 1852, published his large work on Operative Surgery, now in its second edition.

Dr. Smith has recently sailed for Europe, to procure new material for the illustration of his course.

In a letter received from Dr. Ruschenberger, of the U. S. Navy, now attached to the flag ship Independence, is related the following instance of lofty tumbling.

"We had an odd accident. A seaman, off Cape Horn, in a gale of wind, was standing, on a level with the cap, in the weather main top-mast rigging, to guide the main top-gallant yard in its descent from aloft. A heavy roll brought the yard against him and flung him off, head downwards. As he fell the main topmast back stay was embraced betwixt his body and left arm. When a little above the shearpoll a rope caught his feet and turned him over, so that he alighted on his feet in the main chains. He was brought in upon deck unhurt. He said he tried to seize hold of the back stay, but came down so — fast

he could not hold on. On being questioned he said he was not hurt, but felt 'considerably shook up.'

I remember a fat boy, who fell asleep in the fore-top of the U. S. S. Peacock, and rolled out. He fell on deck upon his side; his contusion was so slight he was not excused from duty a single day. He fell about 40 feet, but the spars of the Independence are those of a ship of the line, and her main cap is 100 feet above the deck.

Abstract of Meteorological Observations for April, 1855, made at Philadelphia, Pa. Latitude 39° 57' 28" N., Longitude 75° 10' 40" W. from Greenwich. By PROF. JAMES A. KIRKPATRICK.

1855. April.	BAROMETER.		THERMOM.		Dew Point	Force of Vapor	Rel. Humid.	Rain- and melted Snow.	Prevailing Winds.	Remarks.
	Mean Daily Mean	Daily Range	Mean Daily Mean	Daily Range						
1	29.355	.369	43.7	11.2	27.3	.123	.31		NW.	M. cl'dy; aft. & ev. clear. Bar.
2	29.602	.247	34.0	12.3	21.3	.077	.32		W.	Cfr. Th. <i>1st</i> 22°. [<i>1st</i> 29.234]
3	29.963	.361	37.7	3.7	33.3	.182	.60		NW.	Clear. <i>2</i>
4	30.116	.153	44.3	6.7	24.7	.097	.22		Var.)	Aft. cloudy; m. and ev. clear.
5	29.816	.266	43.8	6.8	41.7	.265	.91	0.922	NE.	Cloudy; ev. fog. <i>Rain</i> all day.
6	29.562	.254	52.0	8.2	36.7	.229	.44	0.255	WNW.	Cloudy; ev. and night <i>Rain</i> .
7	29.700	.139	46.0	6.0	32.2	.172	.43		NW.	Clear.
8	29.771	.071	47.3	4.0	35.7	.216	.43		SW.	M. fog; aft. and ev. clear.
9	29.805	.034	50.0	6.7	46.0	.321	.80	0.072	SW.	Cloudy; m. and ev. <i>Rain</i> .
10	29.785	.084	49.3	1.3	48.3	.349	.86	0.254	(Var.)	Cloudy; drizzling rain all day.
11	29.791	.080	40.3	9.0	33.3	.186	.82		NW.	M. cl'r; a. & ev. cl'dy. 1 to 2 p.m.
12	29.966	.171	49.3	9.0	25.7	.107	.24		WNW.	M. cl'dy; a. & ev. cl'r. [<i>Snow</i> .]
13	29.980	.053	52.5	3.2	34.3	.203	.39		(Var.)	Cloudy.
14	29.773	.207	55.7	3.2	46.0	.339	.65		(Var.)	Cloudy.
15	29.789	.079	50.7	7.0	47.7	.335	.93	0.331	NE.	<i>Rain</i> till 6 p.m.; ev. clear.
16	30.045	.250	55.3	9.7	37.0	.244	.40		(Var.)	Clear. [2 p.m.]
17	30.016	.079	54.0	3.0	41.3	.283	.54	0.006	SW.	Cloudy. <i>Shower</i> from 1 $\frac{1}{2}$ to
18	29.794	.222	64.0	8.0	53.3	.490	.63		ENE.	M. cloudy; aft. and ev. clear.
19	29.648	.146	73.3	9.3	48.7	.517	.42		NNE.	Cl'dy. <i>Th. highest</i> , 4 p.m. 87°
20	29.650	.098	57.0	16.3	46.0	.339	.65	0.308	(Var.)	M. and aft. cloudy; ev. clear; from 3 to 4 p.m. <i>rain, th'r, l'ng</i> .
21	30.073	.423	55.3	5.0	37.0	.244	.40		NW.	Clear.
22	29.919	.154	57.3	4.7	47.7	.372	.63		SW.	M. and aft. cloudy; ev. clear.
23	30.039	.120	60.0	7.3	40.0	.290	.42		ENE.	Clear.
24	29.959	.118	61.8	8.5	55.3	.510	.68		SW.	Cl'y; m. fog. [8 to 9 p.m. <i>th. ltg</i> .]
25	29.869	.151	74.0	12.5	48.7	.517	.42		(Var.)	Cl'dy. <i>Th. highest</i> at 3 p.m. 87°.
26	29.811	.136	56.7	17.3	48.7	.305	.76		(Var.)	Cloudy; a few drops of rain
27	30.055	.244	56.0	4.0	32.7	.189	.33		NW.	Clear. [at 5 p.m.]
28	30.113	.058	55.3	0.6	32.7	.189	.33		W.	M. & ev. clear; aft. cl'dy. Bar.
29	29.982	.132	56.2	3.8	43.3	.335	.47		NE.	Cloudy. [<i>highest</i> 30.179].
30	29.925	.057	53.5	5.0	46.0	.339	.65		NE.	Cloudy.
Means for April, 1855	29.856	.165	52.9	7.1	39.8	.281	.54	2.148	N. 52° W., 39-100.	
4 yrs	29.808	.193	50.6	7.2	39.1			5.153	N. 53 $\frac{1}{2}$ ° W. 33-100.	

The Monthly Range of the Barometer was 0.945 of an inch., and of the Thermometer 65°.